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ABSTRACT

This monograph lists 500 projects receiving federal funding at the beginning of 1990 from the Office of Maternal and Child Health. For most projects the following information is provided: title, address, phone number, name of a contact person, project start and end dates, and a brief description. Projects are grouped into the following categories: maternal health; infant health; child health; children with special health needs; adolescent health; and general program concerns. Indexes are provided by project title, grantee name, geographical location, and subject. (DB)

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Office of Maternal and Child Health Active Projects FY 1990

An Annotated Listing

National Center for Education in Maternal and Child Health
Washington, D.C.

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The National Center for Education in Maternal and Child Health (NCEMCH) provides information services, educational materials, and technical assistance to organizations, agencies, and individuals with maternal and child health interests. The Center was established in 1982 at Georgetown University, within the Department of Obstetrics and Gynecology. NCEMCH is funded primarily by the U.S. Department of Health and Human Services, through its Maternal and Child Health Bureau (formerly the Office of Maternal and Child Health, Bureau of Maternal and Child Health and Resources Development).

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Preface

Under authority of Title V of the Social Security Act, up to 15 percent of the Maternal and Child Health Services Block Grant may be set aside for the Federal Government to support certain categorical programs referred to as special projects of regional and national significance (SPRANS).

These funds are used to support applied research to expand our knowledge of and broaden our approach to health problems. They are used to support the training of specialized health professionals, upgrade the skills of leadership personnel, develop standards of care, and otherwise improve the quality of maternal and child health services. They support programs to test, counsel, and refer individuals at risk of having or transmitting genetic disorders. They support a regionalized system of comprehensive care for individuals with hemophilia, which can be a model of care for others with chronic disabling diseases. These set-aside dollars support projects that design and test innovative ways to deliver services to mothers, infants, children, and adolescents to prevent illness or injury and maximize their health. They also support the development of systems of services to provide early and effective treatment for handicapped or chronically ill children and enhance a family's ability to care for a child with special health needs.

In fiscal year 1990, the Office of Maternal and Child Health (OMCH) is supporting 500 SPRANS grants. This annotated listing, an annual publication of the National Center for Education in Maternal and Child Health (NCEMCH), provides brief descriptions of each such project. It is based on the project reports in the OMCH annual publication, *Abstracts of Active Projects*, and additional information provided by the SPRANS. It has been produced in order to disseminate information to individuals interested in the field of maternal and child health. NCEMCH wishes to thank OMCH and the SPRANS for providing information on current projects.

The full project report for a given SPRANS may be obtained from NCEMCH. Further information may be requested from individual projects. The name, address, and telephone number of a contact person for each project are also provided.

Introduction

Through most of the 20th century, the Federal Government has played an important role in assuring and safeguarding the health of our Nation's children. The Children's Bureau, which was established in 1912 to "investigate and report . . . upon all matters pertaining to the welfare of children and child life among all classes of our people," was the agency from which the Office of Maternal and Child Health emerged. Among the issues the Bureau was instructed to look into were "the questions of infant mortality, the birth rate, orphanage, desertion . . . accidents and diseases of children . . . and legislation affecting children in the several States and territories." From these early inquiries flowed a wealth of information and new knowledge which influenced States to modernize their laws and encouraged the child health community to develop and improve services for mothers and children.

The first Federal grants-in-aid to the States for infant and maternal health came a decade later, authorized by the Sheppard-Towner Act of 1921, and administered by the Children's Bureau. The plans under which the States used these funds originated in the States and varied greatly, but as a result of widespread discussion of the whole question of maternity and child care the States began a number of new programs which resulted in continued improvement in the health of mothers and children.

Title V of the Social Security Act, enacted in 1935, created the first Federal-State partnership in maternal and child health. Federal funds were provided for three types of work in the States: Maternal and Child Health Services, Crippled Children's Services, and Child Welfare Services. For the most part, the States provided the services which were paid for by a combination of Federal dollars and matching State dollars, and the Federal Government provided leadership to the program. The program was amended over the years to allow it to respond to significant changes in the Nation. Among these were the large numbers of women entering the workforce during World War II with the resulting need for day care programs for infants and children, development of new technologies which extended the lives of premature infants, medical advances in the treatment and prevention of handicapping conditions, the post-war trend to urbanization, and the shortage and maldistribution of skilled health professionals.

Another significant change to Title V came in 1981 with creation of the Maternal and Child Health Services Block Grant. In 1989, more than $554 million was appropriated for this program, 85 percent of which went directly to the States. With it, and their own resources, the States provide a variety of services from well-child clinics to family planning, immunizations to lead poisoning prevention, community-based services for children with special health care needs to other services for low-income and minority women and children and those who might have no other access to services.

The remainder, known as the Federal set-aside, is used by the Federal Government to support special projects of regional or national significance (SPRANS), which include research; training; hemophilia diagnosis and treatment; genetic diseases screening, counseling, and referral; and maternal and child health improvement projects which demonstrate and test a variety of approaches intended to improve the health of and services delivered to mothers, infants, children, adolescents, and children with special health care needs. The Office of Maternal and Child Health also provides support for pediatric AIDS health care demonstration projects and for emergency medical services for children.

These projects offer the promise of more effective ways to organize and deliver services, of new and different services to address both the old and the new morbidities, and of techniques for outreach to high-risk populations so that they can receive appropriate care. They expand our knowledge and develop the leadership for our programs. OMCH-funded projects are not usually

looking for the "magic bullets" to conquer disease; rather, they seek significant, sustained, systemic changes that will have long-term impacts on the health status of mothers and children.

Often the issues these projects address have been public health priorities for decades. Infant mortality is such an issue. The Office of Maternal and Child Health is encouraging creativity and new approaches in its quest for effective programs and knowledge that will enable our Nation to accelerate the decline in infant mortality and eliminate the racial disparity in infant mortality rates. It is funding projects that are designed to strengthen and restructure the perinatal care delivery system, to outreach and bring at-risk women into early prenatal care, to evaluate the components of prenatal care, to look at infant mortality events in order to isolate risk factors, to teach and reinforce parenting skills. Of special current concern are the societal ills which have an adverse impact on birth outcomes—conditions such as homelessness and substance abuse. In collaboration with the Office for Substance Abuse Prevention in the Alcohol, Drug Abuse and Mental Health Administration, a major new initiative has been started for drug-using women and their families—to educate them about the hazards drugs present to the developing fetus, to get them off drugs through appropriate treatments, and to build their coping and parenting abilities so that they do not return to drugs. Some of these projects are focused on the affected children and appropriate interventions to overcome the deficits they may experience. The initiative also encourages multiple agencies to collaborate in addressing this complex problem.

These projects are among the 500 reported in this book which were receiving funding at the beginning of fiscal year 1990. In order to be funded, each of these projects was reviewed by panels of professionals knowledgeable in their fields, rated highly, and recommended for approval.

In research, the Office of Maternal and Child Health supports projects which are intended to develop new knowledge and the application of such knowledge to the health problems of mothers, children, and children with special health care needs. Research grants may be made only to public or nonprofit private institutions of higher learning, or to nonprofit agencies and organizations engaged in research or in maternal and child health or programs for children with special health needs.

Training grants are available for long-term training or for continuing education by public or nonprofit private institutions of higher learning. These funds are focused on providing leadership training in a variety of specialized health professions, including interdisciplinary training, required to provide comprehensive maternal and child health care; providing specialized clinical or laboratory training and services not routinely available; providing professional consultation and technical assistance in connection with training activities; and upgrading skills and competencies of State and local MCH personnel.

Any public or private entity, nonprofit or for-profit, may apply for genetic disease testing and counseling grants, hemophilia diagnosis and treatment center grants, maternal and child health improvement project grants, and pediatric AIDS health care demonstration projects.

The genetics grants provide for the testing, counseling, and referral of individuals at risk for having or transmitting genetic disorders through broad-based, noncategorical, and readily accessible centers on a statewide or regional basis. Linkages of grantees with maternal care and family planning services extend testing and counseling services to additional persons in their childbearing years.

The hemophilia grants support development of regional programs with linkages to private clinicians, State Title V programs, and other resources and serve as a demonstration model for issues relating to regionalization of other chronic and handicapping conditions. Hemophilia is a low prevalence disease which requires a disproportionate amount of health care dollars and resources; regionalization of care is desirable to achieve quality assurance and cost control.

Maternal and child health improvement project (MCHIP) grants support projects which demonstrate how State and local agencies and organizations can improve the health status of mothers and children through the creative modification of their health care systems. For example, they may

explore the effectiveness of outreach techniques, apply innovative methods to identify individuals at risk, develop early and effective intervention techniques, or more effectively use primary providers and specialty services. They may develop systems to gather, analyze, disseminate, and store data and information so as to increase their use by any part of the maternal and child health community. Successful methods developed by MCHIP grantees should be replicable elsewhere in the Nation.

The pediatric AIDS health care projects demonstrate effective ways to prevent infection, especially by reducing perinatal transmission and by reducing the spread to vulnerable groups of young people, and develop innovative programs for managing pediatric patients with AIDS which can serve as models for other communities. They also provide leadership and expertise for national issues associated with this epidemic.

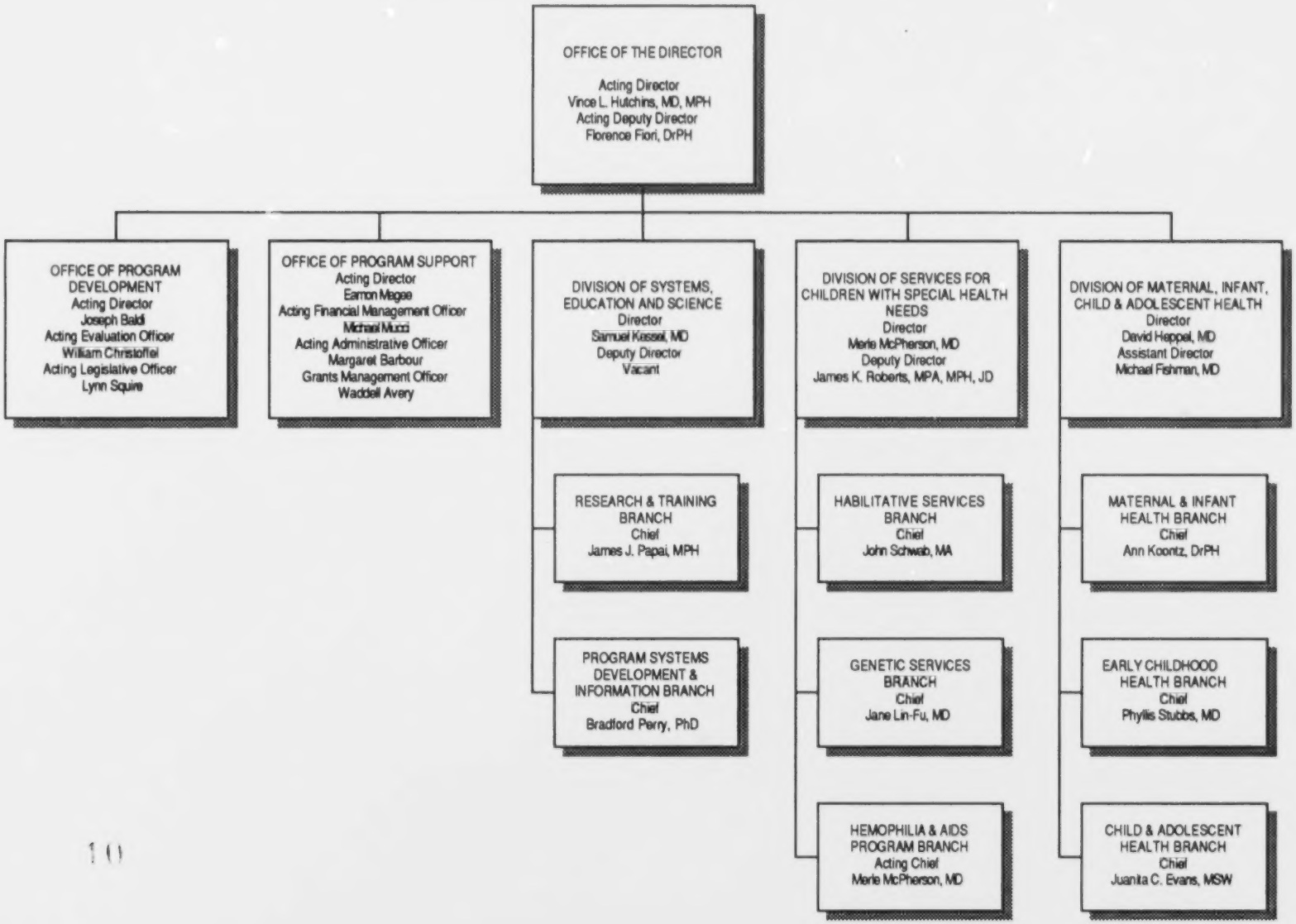
The emergency medical services for children demonstration program is intended to improve the pediatric capacity of existing EMS systems in individual communities. State agencies or medical schools within a State are eligible for the grants. The program is designed to develop and use a body of knowledge about the characteristics of pediatric emergencies, the training of EMS personnel, and other necessary adaptations of the EMS system to handle pediatric emergencies. The program is also assisting all States and jurisdictions to incorporate this information into their EMS systems.

Each year the Office of Maternal and Child Health publishes in the *Federal Register* requests for grant applications, giving specific dates and procedures for applying. At that time, and in guidance material distributed to prospective grantees, it indicates priorities for funding and the issues which are of paramount concern to the program.

The Office of Maternal and Child Health invites potential applicants to inquire about application requirements for the particular categories in which they are interested and then to apply for funding. Inquiries about possible grant support, technical assistance, or programmatic information should be addressed to the Director, Office of Maternal and Child Health, BMCHRD, HRSA, Room 9-11, Parklawn Building, 5600 Fishers Lane, Rockville, Maryland 20857.

The Office of Maternal and Child Health has important alliances with professional, voluntary, and private organizations as well as public health agencies at all levels through which information is shared and collaboration is forged. These efforts are undertaken by the OMCH so that the knowledge gained from projects it supports will be incorporated into prevention programs and comprehensive services provided by both private practitioners and the public sector, with beneficial results for the health of our Nation's mothers and children.

MATERNAL AND CHILD HEALTH BUREAU



Glossary of Commonly Used Acronyms

AACPDM—American Academy for Cerebral Palsy and Developmental Medicine
AAFP—American Academy of Family Physicians
AAP—American Academy of Pediatrics
AAUAP—American Association of University Affiliated Programs for Persons with Developmental Disabilities
ACCH—Association for the Care of Children's Health
ACNM—American College of Nurse-Midwives
ACOG—American College of Obstetricians and Gynecologists
ACORN—Association of Community Organizations for Reform Now
AD/HD—Attention Deficit/Hyperactivity Disorder
AFDC—Aid to Families with Dependent Children
AHP—Allied Health Professionals
AIDS—Acquired Immune Deficiency Syndrome
AMA—American Medical Association
AMCHP—Association of Maternal and Child Health Programs
ANA—American Nurses' Association
APHA—American Public Health Association
ASTHO—Association of State and Territorial Health Officials
AZT—Azidothymidine
BHCDA—Bureau of Health Care Delivery and Assistance
BIA—Bureau of Indian Affairs
BMCHRD—Bureau of Maternal and Child Health and Resources Development
BPD—Bronchopulmonary Dysplasia
CCS—Crippled Children's Services
CDC—Centers for Disease Control
CDF—Children's Defense Fund
CF—Cystic Fibrosis
CHAMPUS—Civilian Health and Medical Program of the Uniformed Services
CHC—Community Health Center
COBRA—Consolidated Omnibus Budget Reconciliation Act (1983)
COPC—Community Oriented Primary Care
CORN—Council of Regional Networks for Genetics Services
CSHCN—Children with Special Health Care Needs
CSHN—Children with Special Health Needs
DDAVP—Desmopressin (1-deamino-8-d-arginine vasopressin)
DHHS—Department of Health and Human Services
DMCH—Division of Maternal and Child Health
DRG—Diagnosis Related Groups
EFNEP—Expanded Food and Nutrition Education Program
EMR—Educable Mentally Retarded
EMS—Emergency Medical Services
EMSC—Emergency Medical Services for Children
EMT—Emergency Medical Technician
EPSDT—Early and Periodic Screening, Diagnosis and Treatment
FDA—Food and Drug Administration
FEMA—Federal Emergency Management Administration
GENES—Genetics Network of the Empire State
GLaRGG—Great Lakes Regional Genetics Group
GPGSN—Great Plains Genetics Service Network
HCEEP—Handicapped Children's Early Education Program
HCFA—Health Care Financing Administration
HIV—Human Immunodeficiency Virus
HMHB—Healthy Mothers, Healthy Babies Coalition
HMO—Health Maintenance Organization

HRSA—Health Resources and Services Administration
ICHP—Improved Child Health Projects
ICU—Intensive Care Unit
IEP—Individualized Education Plan
IFSP—Individualized Family Service Plan
IHS—Indian Health Service
IMR—Infant Mortality Rate
JRA—Juvenile Rheumatoid Arthritis
MARHGN—Mid-Atlantic Regional Human Genetics Network
MCHIP—Maternal and Child Health Improvement Project
MCH—Maternal and Child Health
MHC—Migrant Health Center
MR—Mentally Retarded
MSAFP—Maternal Serum Alpha-Fetoprotein
MSRGSN—Mountain States Regional Genetic Services Network
NACHRI—National Association of Children's Hospitals and Related Institutions
NASW—National Association of Social Workers
NERGG—New England Regional Genetics Group
NHANES—National Health and Nutrition Examination Survey
NHSC—National Health Service Corps
NICHD—National Institute of Child Health and Human Development
NICU—Neonatal Intensive Care Unit
NIH—National Institutes of Health
NIMH—National Institute of Mental Health
OB/GYN—Obstetrics and Gynecology
OMCH—Office of Maternal and Child Health
OSAP—Office for Substance Abuse Prevention
OSERS—Office of Special Education and Rehabilitative Services
OTA—Office of Technology Assessment
P.L.—Public Law
PacNoRGG—Pacific Northwest Regional Genetics Group
PHN—Public Health Nurse
PHS—Public Health Service
PKU—Phenylketonuria
PPC—Pediatric Pulmonary Center
PSA—Public Service Announcement
PSRGN—Pacific Southwest Regional Genetics Network
RD—Rheumatic Disease
RFP—Request for Proposal
RP—Retinitis Pigmentosa
SADD—Students Against Drunk Driving
SAM—Society for Adolescent Medicine
SCAN—Shared Communication and Assistance Network
SERGG—Southeastern Regional Genetics Group
SIDS—Sudden Infant Death Syndrome
SKIP—Sick Kids Need Involved People
SLE—Systemic Lupus Erythematosus
SOBRA—Sixth Omnibus Budget Reconciliation Act (1986)
SPRANS—Special Projects of Regional and National Significance
SSA—Social Security Administration
SSI—Supplemental Security Income
TEFRA—Tax Equity and Fiscal Responsibility Act (1982)
TEXGENE—Texas Genetics Network
UAF—University Affiliated Facility
UAP—University Affiliated Program
USDA—United States Department of Agriculture
USMBHA—United States-Mexico Border Health Association
VNA—Visiting Nurse Association
WIC—Special Supplemental Food Program for Women, Infants and Children
ZDV—Zidovudine

Maternal Health

Prenatal Care: Content and Utilization

Comprehensive Prenatal Care Networks Project
East Bay Perinatal Council
2794 Garden Street
P.O. Box 7322
Oakland, CA 94601
(415) 261-4050

MCHIP
MCJ-063891
10/01/86-01/30/90
Project Directors:
Denise Peebles, M.A.
Bari Cornet, M.P.H., M.S.W.

The goal of this project is to reduce the incidence of low birthweight by ensuring the provision of comprehensive perinatal services to low-income, Medicaid-eligible pregnant women. The project seeks to encourage cooperation between public and private sector health care providers and to ensure early and continuous participation in prenatal care by pregnant women. Activities include the development of protocols, management systems, and logistical arrangements that facilitate public and private sector participation in the Comprehensive Perinatal Services Program.

Hispanic Males Outreach Project
Hill Health Center
400 Columbus Avenue
New Haven, CT 06519
(203) 776-9594

MCHIP
MCJ-096002
10/01/87-09/30/90
Project Director:
Tamar Besson, M.P.H.

In this project two community health centers work together to demonstrate that greater Hispanic male involvement during the prenatal and infancy periods results in improved perinatal and infant outcomes. Project objectives are to: (1) Reduce the low birthweight and perinatal mortality rates throughout the project area; (2) increase the number of prenatal visits for Hispanic women; and (3) increase Hispanic male involvement through prenatal and postpartum classes and group activities, job counseling and training, employment referrals, recreation, and health education.

Committee on Nutritional Status during Pregnancy and Lactation
National Academy of Sciences
Institute of Medicine
2101 Constitution Avenue, N.W.
Washington, DC 20418
(202) 334-1917

MCHIP
MCJ-116011
10/01/87-09/30/90
Project Director:
Carol West Suitor, D.Sc., R.D.

This project establishes an expert committee which evaluates and documents current scientific evidence on pregnancy and lactation and proposes nutritional recommendations for pregnant and lactating women. Activities include workshops, meetings, and studies and reports on such subjects as weight gain during pregnancy; vitamin, mineral, and protein supplements; nutrient-nutrient and nutrient-drug interactions; and nutrition during lactation.

Increasing Access to Prenatal Care Through Problem Identification and Program Evaluation
Wayne State University
275 East Hancock Street
Detroit, MI 48201
(313) 577-1147

MCHIP
MCJ-263811
10/01/86-09/30/90
Project Director:
Marilyn L. Poland, Ph.D., R.N.

This project addresses high infant mortality rates in Detroit and Wayne County as the general area of concern. The problems of high infant mortality rates and access to prenatal care will be addressed over 3 years through a program of technical assistance to the Detroit/Wayne County Infant Health Promotion Coalition. The coalition, comprised of 36 public and private agencies, was established to address the high infant mortality rate through identification of contributing factors and development of programs to reduce these factors.

Migrant Lay Health Advisors: A Strategy for Health Promotion
University of North Carolina at Chapel Hill
School of Public Health
Department of Maternal and Child Health, CB #7400
Chapel Hill, NC 27599
(919) 966-3807

MCHIP
MCJ-376003
10/01/87-09/30/90
Project Director:
Elizabeth L. Watkins, D.Sc.

This project seeks to improve the perinatal and infant outcomes among migrant women and infants in North Carolina by recruiting and training lay health advisors. These health advisors are trained to disseminate accurate information on pregnancy and infant care in a culturally appropriate manner, to link members of this transitory and isolated community with health services, and to help women develop an increased awareness of themselves as leaders and advocates. A longitudinal, quasi-experimental study design will be used to determine the effectiveness of the program in improving perinatal outcomes and infant health status.

Changing the Configuration of Early Prenatal Care (EPIC)
Rhode Island Department of Health
Division of Family Health
Cannon Building
3 Capitol Hill
Providence, RI 02908-5097
(401) 277-2312

MCHIP
MCJ-443841
10/01/86-09/30/90
Project Director:
Jane Griffin, M.P.H.

This project seeks to improve pregnancy outcomes for high-risk, inner-city women through early prenatal care and home intervention. Pregnant women in the study area receive weekly visits from nurses who follow a curriculum designed to motivate pregnant women to alter those lifestyle behaviors that place their babies at risk for low birthweights. A randomized controlled trial design will be used to test the effectiveness of the program.

Uterine Activity Patterns: Definition with Home Monitor

University of Texas Health Science Center at Houston
Department of Obstetrics, Gynecology and
Reproductive Sciences
6431 Fannin, Suite 3286
Houston, TX 77030
(713) 792-5362

Research
MCJ-480561
12/01/87–11/30/89
Project Director:
• Robert K. Creasy, M.D.

This project uses a home ambulatory uterine monitoring system to attempt to define normal uterine activity across gestational age in a group of women whose pregnancies are entirely uncomplicated. The study will test the hypotheses that uterine activity appears in normal pregnant women in the late second trimester; the quality of uterine activity increases throughout gestation; there is a cyclic, diurnal pattern of uterine activity through gestational age; and uterine activity in nulliparous women is comparable to that seen in multiparous women, when matched for gestational age.

Maternal Health

Risk Reduction in Pregnancy

Born Free: Perinatal Substance Abuse Intervention and Recovery Model
Contra Costa County Health Services Department
595 Center Avenue, Suite 200
Martinez, CA 94553
(415) 646-1165

OSAP/OMCH
SP-01151
09/01/89–08/31/94
Project Director:
Hope H. Ewing, M.D.

The Contra Costa County Health Services Department will conduct a program of substance abuse services for low-income, pregnant, and postpartum women. This program will coordinate and augment county services in order to identify and educate substance-abusing women in prenatal clinics and on labor and delivery, and to induce them to enter, participate in, and remain in appropriate and accessible recovery services.

Maternal Pesticide Exposure and Pregnancy Outcome
San Diego State University
Graduate School of Public Health
San Diego, CA 92182
(619) 229-2443

Research
MCJ-060546
11/01/86–10/31/89
Project Director:
Winnie O. Willis, Sc.D.

The primary objective of this study is to determine whether an association exists between adverse birth outcome and exposure to pesticides which exert their effects in insects and mammals by inhibiting cholinesterase. The following hypotheses are tested: (1) Maternal exposure to pesticides during pregnancy increases the relative risk of spontaneous abortion and low birthweight; (2) women who have spontaneous abortion, low birthweight babies, preterm labor, and toxemia of pregnancy have lower mean red blood cell (RBC) cholinesterase levels than women who do not; (3) women who report exposure to anticholinesterase pesticides during pregnancy have lower mean RBC cholinesterase levels than women who report no exposure; and (4) pregnant women who are employed in agriculturally related occupations where many anticholinesterase pesticides are used have lower mean RBC cholinesterase levels.

Perinatal Substance Abuse Prevention Project
Logan Heights Family Health Center
1809 National Avenue
San Diego, CA 92113
(619) 234-8171

OSAP/OMCH
SP-01621
09/01/89–08/31/94
Project Director:
Karen I. McCabe, M.S.

The Perinatal Substance Abuse Prevention Project is a prevention and treatment program designed to reduce the incidence of alcohol and substance use among prepregnant, pregnant, and postpartum women. The program is targeted toward medically underserved, low-income, predominantly Hispanic women who are users of services provided by the Logan Heights Family Health Center, residents of its service areas, or who enter the program by virtue of programmatic referral linkages. Service components include interagency and interdepartmental promotion of the availability of services, identification of women at risk at all points of access to the Health Center, a treatment component which stresses culturally sensitive and bilingual support services, group and individual counseling, parenting classes, well-baby care, and an array of community referral linkages.

Physiologic Risk Assessments to Predict Preterm Birth
Mount Zion Hospital and Medical Center
University of California at San Francisco
P.O. Box 7291
Pavilion, Fifth Floor
San Francisco, CA 94143
(619) 594-2874

Research
MCJ-060580
10/01/88–09/30/91
Project Director:
Denise Main, M.D.

This study seeks to validate a highly predictive (retrospective) screening method using uterine contraction monitoring recently developed by the principal investigator, and determine whether the ability to use this method to identify women at risk for preterm labor can be further improved by the addition of pelvic examination findings. The current 3-year project addresses whether these physiologic measures (i.e., uterine contraction frequency, cervical examination, and vaginal pH), when determined at standard prenatal visit intervals, can be used effectively to identify women who subsequently experience preterm birth because of preterm labor or preterm premature rupture of the membranes (PPROM) and whether interpretation of uterine contraction data can be improved and standardized by means of a computer program.

Effectiveness of an Urban Low Birthweight Intervention
Better Babies Project, Inc.
1717 Massachusetts Avenue, N.W.
Washington, DC 20036
(202) 397-3131

Research
MCJ-110558
10/01/87–09/30/91
Project Director:
Deborah L. Coates, Ph.D.

The major research objective of this study is to determine whether a multirisk factor intervention based on a comprehensive service/social support model can reduce the incidence of low birthweight by 20 percent in a predominantly black Washington, DC, neighborhood by the end of a 3-1/2-year period. A second research objective is to test the effectiveness of a self-help guide, designed for and tested on pregnant women, in reducing the incidence of smoking behavior for this population of pregnant women.

Interconceptional Support of Women at Risk for Low Birthweight
North Central Florida Maternal and Infant Care Project
730 North Waldo Road
Building A, Suite B
Gainesville, FL 32601
(904) 392-4491

MCHIP
MCJ-126007
10/01/87–09/30/90
Project Director:
Diane Dimperio, M.A., R.D.

The goal of this project is to reduce the incidence of low birthweight by improving the preconceptional health of women who are at high risk for delivering a low birthweight infant. High-risk women are identified at delivery and are followed for 2 years. Client services are then provided by community health workers, who make home visits and develop a risk reduction plan for each client. Intervention protocols are developed for each risk factor and involve referral to the appropriate resource, followup to ensure client compliance, and reinforcement of professional counseling or supplemental teaching.

Interdisciplinary Training in Maternal Nutrition
University of Florida
Department of Obstetrics and Gynecology
North Central Florida Maternal and Infant Care Project
730 Northeast Waldo
Building A, Suite B
Gainesville, FL 32601
(904) 392-3027

Training
MCJ-009119
07/01/88-06/30/93
Project Director:
Charles S. Mahan, M.D.

This training grant provides funding for a comprehensive course in maternal nutrition which is offered twice a year to a professional multidisciplinary audience. Through lectures, workshops, and informal exchanges, health care providers learn the science and application principles of assessment and management of maternal nutrition.

Model Projects for Pregnant and Postpartum Women and Their Infants
University of South Florida
College of Public Health
13301 Bruce B. Downs Boulevard
Tampa, FL 33612-3899
(813) 974-4860

OSAP/OMCH
SP-01559
09/01/89-08/31/94
Project Director:
William Ward, Dr.P.H.

Hillsborough County in Florida is a high-risk area for low birthweight babies due to the high number of cocaine-positive babies, along with alcohol and tobacco use by women during pregnancy. This project has three health outcome objectives. These objectives are to: (1) Improve birth outcomes in high-risk census tracts through reducing substance use in pregnancy; (2) improve birth outcomes in pregnant substance abusers identified by cooperating agencies; and (3) improve the health and social outcomes of the pregnant substance abusers through strengthening linkages among prenatal care services, high-risk pregnancy services, and substance abuse treatment programs.

Prevention of Substance Abuse by Pregnant and Postpartum Women
Shands Hospital
Department of Social Work Services, Box J-306
Gainesville, FL 32610
(904) 395-0224

OSAP/OMCH
SP-01679
09/01/89-09/30/94
Project Director:
Diane P. Mauldin, L.C.S.W.

This project addresses the increasing problem of substance abuse among pregnant and postpartum women by providing case management services prenatally and for 2 years postpartum. Interventions focus on both prevention and treatment for the women and their children. Services include clinical intervention, community referrals, substance abuse education, and concrete financial assistance as necessary.

Project K-MOD (Keeping Mothers Off Drugs)
Apalachee Center for Human Services, Inc.
625 East Tennessee Street
P.O. Box 1782
Tallahassee, FL 32302
(904) 487-2930

OSAP/OMCH
SP-01179
09/01/89–09/30/91
Project Director:
Frank Beeman, M.A.

Project K-MOD (Keeping Mothers Off Drugs) is located within the Chemical Dependency Unit of Apalachee Center for Human Services. The project will link together county health units; economic aid services; and Children, Youth, and Families services, and will expand substance abuse treatment availability. In addition, the project will provide needed transportation and child care supervision for those mothers within the target population who have neither.The project will develop a continuum of services for pregnant/postpartum low-income minority mothers ages 18–44 in Gadsden, Leon, Wakulla, and Jefferson Counties who are abusing psychoactive chemicals.The evaluation plan will consist of three parts: A system process evaluation, a client process evaluation, and a project outcome evaluation.

Comprehensive Intervention for Recovering Addict Mothers
Emory University School of Medicine
Human and Behavioral Genetics Research Laboratory
Georgia Mental Health Institute
1256 Briarcliff Road, N.E.
Atlanta, GA 30306
(404) 894-8288

OSAP/OMCH
SP-01198
09/01/89–08/31/91
Project Director:
Iris Smith, M.P.H.

The aim of this project is to reduce the incidence of developmental problems associated with prenatal drug exposure and maternal drug use postpartum by: (1) Increasing the number of women who are able to discontinue drug use during pregnancy through community outreach, education, and intervention; and (2) facilitating continued abstinence postpartum through case management; psychosocial support; training in interpersonal, coping, and job-seeking skills; parenting education; and instrumental support to women who are motivated to discontinue their use of drugs.

Minority Connection: Reduction of Minority Infant Mortality
CONTINUUM Alliance for Healthy Mothers and Children
1252 West Peachtree Street, N.W., Suite 311
Atlanta, GA 30309
(404) 873-1993

MCHIP
MCJ-136004
10/01/87–09/30/90
Project Director:
Mary Langley, R.N., M.P.H.

This project aims to reduce postneonatal mortality rates associated with inadequate parenting skills and poor utilization of prenatal and child health care services. Activities include establishment of a resource mothers program in which church women are trained to assist pregnant women in negotiating the health care and social services systems, and implementation of a teen peer counselor program. The project also establishes self-sustaining local coalitions to monitor and address problems that contribute to poor pregnancy outcomes.

Pineland Mental Health, Mental Retardation, and Substance Abuse Services
Bulloch County Board of Health
Pineland Mental Health, Mental Retardation and Substance Abuse
21 North Zetterower Avenue
Statesboro, GA 30458
(912) 764-6971

OSAP/OMCH
SP-01189
09/01/89–08/31/93
Project Director:
Nancy S. Waters

This project proposes to coordinate community and State services to maximize treatment and general health care for substance-abusing pregnant women and their infants. The project will focus on three major goals for intervening with substance-abusing pregnant women and their newborns in a 16-county area of Georgia. Project goals are to: (1) Provide appropriate training to staff of human services agencies dealing with pregnant women; (2) develop a model program of intervention for selected pregnant women who are identified as substance abusers with the result of improving the birth outcome and decreasing the effects of substance abuse on the infants; and (3) provide a 2-year followup of the women and infants served by this program to assess the impact of the program on the development of the child and on the lifestyle of the mother.

IPCA Perinatal Care Project for Substance Use Prevention
Idaho Primary Care Association
P.O. Box 6756
Boise, ID 83707
(208) 345-2335

OSAP/OMCH
SP-01593
09/01/89–08/31/94
Project Director:
Dean A. Hungerford

This model develops a rural program designed to decrease the use of substances by pregnant and postpartum women, and to reduce the incidence of infants affected by maternal substance use. The model links primary medical care resources (community and migrant health centers) with the State's substance abuse treatment facilities and other community support services. A case manager will be assigned to assure that each patient is assisted in obtaining the services needed.

Demonstration Model of Risk-Appropriate Prenatal Care System to Reduce the Incidence of Low Birthweight in Maine
Medical Care Development, Inc.
11 Parkwood Drive
Augusta, ME 04330
(207) 622-7566

MCHIP
MCJ-233820
10/01/86–03/31/90
Project Director:
Laura C. Ronan, M.P.H.

This project seeks to reduce infant morbidity and mortality due to low birthweight, and to demonstrate a cost-effective prenatal care program which is integrated into the existing system and can be duplicated in other States. Project objectives include instituting a model prenatal education, counseling, referral, and followup program in physicians' offices and other sites, and enhancing the education and counseling skills of prenatal care providers.

Smoking Cessation/Relapse Prevention in Low-Income Mothers
Johns Hopkins University
Department of Health Policy and Management
624 North Broadway
Baltimore, MD 21205
(301) 955-3018

Research
MCJ-240562
11/01/87–10/31/91
Project Director:
Ruth R. Faden, Ph.D., M.P.H.

The overall objective of this study is to test the effectiveness of inexpensive, easily administered interventions designed to assist low-income pregnant women and new mothers who smoke to quit or to significantly reduce their smoking levels. The general research hypothesis of the study is that pregnant smokers who are exposed to multiple smoking cessation and relapse prevention interventions will exhibit greater levels of reduction and abstinence than those who are not exposed.

Improving Pregnancy Outcomes of Substance-Abusing Mothers
Coalition on Addiction, Pregnancy, and Parenting of the
Massachusetts Health Research Institute, Inc.
349 Broadway
Cambridge, MA 02139
(617) 661-3991

OSAP/OMCH
SP-01144
09/01/89–08/31/94
Project Director:
Norma Finkelstein, Ph.D.

The purpose of this program is to prevent adverse birth outcomes and birth defects in babies born to alcohol and drug addicted mothers, to intervene early in the pregnancy of addicted women and assist them in staying drug free, to prevent relapse during pregnancy and after delivery, to assist these women in acquiring appropriate parenting skills, and to increase access to treatment for pregnant addicted women throughout Massachusetts. An ultimate goal of the program is to develop a model for the delivery of services to pregnant and postpartum alcohol and drug addicted women and their children that can be replicated in other parts of the country.

Preconceptional Vitamin Use and Neural Tube Defects
Boston University School of Medicine
Slone Epidemiology Unit
1371 Beacon Street
Brookline, MA 02146
(617) 734-6006

Research
MCJ-250567
03/01/88–02/28/92
Project Director:
Allen A. Mitchell, M.D.

This study seeks to establish the potential benefit of preconceptional vitamin supplementation in reducing the incidence of neural tube defects (NTDs), and examine some of the potential hazards of excessive preconceptional vitamin supplementation. Two primary hypotheses and one secondary hypothesis guide the study. The primary hypotheses are: (1) Multivitamin supplementation in the month immediately preceding the last menstrual period (LMP) is associated with a 50 percent reduction in NTDs; and (2) folate supplementation in the month immediately preceding the LMP is associated with a 50 percent reduction in NTDs. The secondary hypothesis posits that excessive supplementation with vitamins or minerals in the month either preceding or including conception or in the months following conception increases the risk of selected birth defects.

Study of Psychosocial Factors in Maternal Phenylketonuria
Boston Children's Hospital
Department of Psychiatry
300 Longwood Avenue
Boston, MA 02115
(617) 735-7945

Research
MCJ-250529
01/01/88–12/31/90
Project Director:
Susan E. Waisbren, Ph.D.

Women with phenylketonuria (PKU) are at risk for bearing children with mental retardation and/or physical disabilities. Dietary treatment during pregnancy, if initiated prior to conception, offers protection to the fetus. Many women seek medical attention after they are pregnant, however. The investigators in this study posited that psychosocial factors determine when a young woman with PKU is likely to plan her pregnancy and comply with medical recommendations for treatment. A 3-year prospective longitudinal study is currently under way to test these assumptions using a stage model of decision making.

Mother and Infant Substance Abuse Network
Detroit Health Department
1151 Taylor Street
Detroit, MI 48202
(313) 876-4228

OSAP/OMCH
SP-01619
09/01/89–08/31/91
Project Director:
Darlinda VanBuren, M.P.H.

The Detroit Health Department's Mother and Infant Substance Abuse Network will coordinate substance abuse and maternal/infant care for 250 low-income, substance-abusing, pregnant women. Treatment services will be provided by the Eleanor Hutzel Recovery Center, the only local agency which provides both substance abuse treatment and prenatal care for pregnant women. Case management services will ensure coordination of case finding; quality assurance; prenatal/postpartum and followup services; and medical, social, and substance abuse services to participating clients. This program will impact substance-using women and their infants within the city of Detroit by making treatment available and accessible and by increasing the number of positive birth outcomes.

Perinatal Substance Abuse Prevention Program
Model Cities Health Center, Inc.
430 North Dale Street
St. Paul, MN 55103
(612) 222-6029

OSAP/OMCH
SP-01610
09/01/89–8/31/94
Project Director:
Beverley O. Hawkins, Ph.D.

Model Cities Health Center, Inc., is implementing a 5-year community intervention project to improve perinatal outcomes among women of childbearing age at risk for cocaine use. Objectives and methods for intervention include use of mass media, community outreach and education, case-finding and case management, peer-led support groups, provider education on effects of cocaine use during pregnancy, parenting education, and early childhood assessment of growth and development.

Reducing the Risk of Low Birthweight and Its Adverse Sequelae

Minnesota State Department of Health
Division of Maternal and Child Health
P.O. Box 9441
717 Southeast Delaware Street
Minneapolis, MN 55440
(612) 623-5166

MCHIP
MCJ-276008
10/01/87–09/30/90
Project Directors:
Carolyn McKay, M.D.
Judith Brown, Ph.D.

The goal of this project is to reduce the risk of low birthweight and its adverse sequelae through prenatal weight gain intervention services. The project has incorporated a social marketing research approach into the development of intervention services. Social marketing research techniques employed include focus groups, interviews, and a questionnaire survey to gain insights into the knowledge, beliefs, and practices of the target population and the patient care providers who serve them. Project accomplishments include the development of a case management prenatal nutrition service model for prenatal weight gain and related dietary guidance; the publication of a report summarizing the results of the deliberations of a national panel of prenatal weight gain experts; and and the translation of strategies for delivering intervention messages into educational tools and clinic protocols.

Comprehensive Perinatal Program for Pregnant Drug Users

University of New Mexico School of Medicine
Department of Obstetrics and Gynecology
UNMH-6S
Albuquerque, NM 87131
(505) 277-8386

OSAP/OMCH
SP-01450
09/01/89–08/31/94
Project Director:
Luis Curet, M.D.

The purpose of this project is to develop a well organized core perinatal program for high-risk pregnant substance abusers and their infants to decrease the rates of infant morbidity and infant mortality; to enhance pregnancy outcome; and to develop a healthy attachment bond between mother and infant. Services will be delivered to this high-risk population through a multidisciplinary team approach.

Improved Prenatal Detection of the Fragile X Syndrome

Research Foundation for Mental Hygiene, Inc.
Institute for Basic Research in Developmental Disabilities
1050 Forest Hill Road
Staten Island, NY 10314
(718) 494-5236

Research
MCJ-360587
10/01/89–09/30/94
Project Directors:
Edmund C. Jenkins, Ph.D.
Michael S. Krawczun, Ph.D.

The fragile X syndrome, the most prevalent inherited form of mental retardation, is preventable by prenatal testing. Prenatal diagnosis is not yet widely available because the testing is technically difficult and is not 100 percent reliable. The goal of this project is to develop a more reliable prenatal test.

Maternal Smoking and Vitamin/Antioxidant Status
Our Lady of Mercy Medical Center
600 East 233rd Street
Bronx, NY 10466

Research
MCJ-360582
06/01/89–05/31/92
Project Director:
Edward P. Norkus, Ph.D.

This research study will determine if the low-to-deficient levels of vitamin C and vitamin E found in the newborn infant persist or reappear during early infancy as the infant becomes a passive cigarette smoker in the home. Second, this research will determine if human breast milk from cigarette-smoking mothers contains adequate vitamin C and vitamin E to meet the nutritional needs of the infant during lactation. Third, this research will determine if vitamin C and E supplementation of pregnant women who smoke improves the low-to-deficient nutritional status of mother and baby.

Maternity, Infant Care—Treatment Intervention Program for Pregnant and Postpartum Women and Their Infants (MIC-TIP)
Medical and Health Research Association of
New York City, Inc.
40 Worth Street, Room 720
New York, NY 10013
(212) 285-0220

OSAP/OMCH
SP-01150
09/01/89–08/31/94
Project Director:
Donna O'Hare, M.D.

The goals of the project are to reduce substance abuse, improve birth outcomes, and reduce the extent to which infants are affected by maternal substance use in a group of maternity patients in three New York City prenatal clinics via a comprehensive, case-managed approach. This approach will utilize existing community resources, including drug treatment, social service, and community organizations. Activities will include outreach, a broad range of maternity and drug treatment services, intensive followup, parenting education, postpartum home visits, and supportive followup to assist patients in obtaining and utilizing existing community services. A community resource manual will be developed.

Women and Infants (WIN)
New York City Department of Health
Bureau of Maternity Services and Family Planning
280 Broadway, Room 303
New York, NY 10007
(212) 566-7735

OSAP/OMCH
SP-01691
09/01/89–08/31/94
Project Director:
Cynthia R. Driver, M.P.H., R.N.C.

The purpose of the Women and Infants project is to provide chemically dependent pregnant and postpartum women, especially cocaine and crack users, with comprehensive outpatient drug treatment and health services. Using the resources of existing community agencies, comprehensive services will be organized and integrated at one site to improve access. The infants and preschool children of enrolled women will receive pediatric care onsite, and needed social services, such as child care, will be provided.

Women's and Infant's Substance Abuse Program
Robeson Health Care Corporation
P.O. Box 1629
Pembroke, NC 28372
(919) 521-9355

OSAP/OMCH
SP-01601
09/01/89-08/31/94
Project Director:
James A. Martin, Ph.D.

The demonstration project will develop an intensive outpatient treatment program for perinatal patients and their children within the context of a rural community health center. The goal of the program is to decrease the amount of drugs and alcohol used by the perinatal patients, decrease the effects of fetal exposure to alcohol and drugs, and increase the coordination among service providers.

Hope for Families
St. Vincent Medical Center
Department of Pediatrics
2213 Cherry Street
Toledo, OH 43608
(419) 321-3589

OSAP/OMCH
SP-01107
09/01/89-08/31/91
Project Director:
Asha Patel

Hope for Families is designed to involve the general community, lay and professional, in preventing substance use during pregnancy through education and awareness of the full scope of the problem. The project uses the public health approach of primary, secondary, and tertiary prevention. Primary prevention is achieved through education and awareness activities; secondary prevention is achieved through early identification of the problem with toxicology screening. Tertiary prevention minimizes the consequences of substance use through aggressive intervention. Specifically, Hope for Families will serve 175 substance-using pregnant women from a central city population. Through comprehensive health care, substance use treatment, group process, and social services, these women will reduce or eliminate substance use during pregnancy and subsequent to pregnancy.

Coordinated Care System for Substance Abusing Pregnant Women
Multnomah County Office of Women's Transition Services
610 Southwest Alder Street, Room 515
Portland, OR 97205
(503) 248-3367, ext. 6629

OSAP/OMCH
SP-01552
09/01/89-08/31/91
Project Director:
Joanne Fuller

The Alcohol and Drug Prenatal Treatment (ADAPT) Program of the Office of Women's Transition Services in Multnomah County, Oregon, was developed to address the problem of substance-abusing pregnant women booked in the Multnomah County jail. The goals and objectives of the ADAPT Program include: (1) Births of healthier babies to female offenders; (2) involvement in alcohol and drug treatment services and prenatal care for this population of female offenders; and (3) ending substance abuse during pregnancy in this population.

Project Network: A Model of Coordinated, Managed Care
Emanuel Hospital and Health Center
2801 North Gantesbein Avenue
Portland, OR 97227
(503) 280-4837

OSAP/OMCH
SP-01562
09/01/89–08/31/94
Project Director:
Jeanne S. Cohen, R.C.S.W.

Project Network is a comprehensive, compassionate care approach for pregnant drug users and their infants. It is a program designed to promote early intervention and prevention. A broad range of services provide continuity of contact, support, intensive outpatient drug treatment, education and advocacy for enrollees, direct access to perinatal and pediatric care until infants reach 2 years of age, and incentives for participants to avail themselves of care and to remain in drug treatment until they reach recovery. Direct service is enhanced through a system of managed care in coordination with a multitude of community agencies who provide a formal network of resources.

Epilepsy in Pregnancy: Developmental Followup of Infants
University of Washington
Child Development and Mental Retardation Center
Seattle, WA 98195
(206) 545-1350

Research
MCJ-530552
04/01/87–03/31/90
Project Director:
Mark S. Yerby, M.D., M.P.H.

This project studies the effects of epilepsy on pregnancy outcomes. A group of pregnant women with epilepsy and a group of nonepileptic pregnant women will be followed throughout pregnancy; case and control infants will then be followed until 3 years of age. If group differences are found, possible correlations between outcome and maternal prenatal and perinatal history (i.e., seizure type and frequency, and antiepileptic drug use) will be investigated.

Targeted Adolescent Pregnancy Substance Abuse Project
University of Washington Medical Center
Social Work Department, RC-30
1959 Northeast Pacific Street
Seattle, WA 98195
(206) 548-4370

OSAP/OMCH
SP-00472
09/01/89–08/31/91
Project Director:
Candyce S. Berger, Ph.D.

The Targeted Adolescent Pregnancy Substance Abuse Project is a collaborative effort between the University of Washington School of Social Work and the Seattle/King County Public Health Department. Specialized drug prevention services are provided to high-risk pregnant/parenting adolescents and their support network as both clinical expertise and literature indicate that pregnant and/or parenting adolescents are at higher risk for substance abuse because of the stress brought on by pregnancy and parenting at an early age. Three interventions, case management, drug prevention skills training, and parenting education, are provided to the client in order to: (1) Reduce stress in the client environment, and (2) provide life skills training, which will enable the client to develop and maintain a successful drug-free lifestyle.

Rural South Central Wisconsin Perinatal Addiction
University of Wisconsin at Madison
Lowell Hall, Room 521
610 Langdon Street
Madison, WI 53703
(608) 262-8987 or 262-5407

OSAP/OMCH
SP-01641
09/01/89–08/31/94
Project Director:
Raymond Kessel, Ph.D.

The rural south central Wisconsin perinatal substance abuse project is a partnership between the University of Wisconsin, perinatal centers, primary care providers, and community-based agencies. It provides coordinated services in prevention, intervention, treatment, and followup for women and infants who may be affected by substance use during the perinatal period. Project activities include public awareness/outreach, community education and training, direct clinical services, support for pregnant adolescents, consultation and technical assistance in evaluation and replication planning, and community organization and networking to strengthen rural county systems addressing perinatal substance abuse issues.

Maternal Health

Systems Development for Perinatal Services

Central Alabama System of Perinatal Care
Alabama Department of Public Health
Bureau of Family Health Services
434 Monroe Street
Montgomery, AL 36130-1701
(205) 261-5661 or 261-5052

MCHIP
MCJ-016010
10/01/87–09/30/90
Project Director:
Saundra Wheeler

The goal of this project is to establish an organized system of perinatal care which will improve the present unfavorable maternal and child health indices in the project area. Registered nurses, certified nurse-midwives, and obstetrical gynecologists will be involved. The project will focus on outreach, risk-based prenatal care and planned delivery, case management, postdelivery home visits, and sick-child care.

American Samoa Healthy Generations Project
American Samoa Department of Health
LBJ Tropical Medical Center
Pago Pago, AS 96799
(684) 633-4559

MCHIP
MCJ-606003
10/01/88–09/30/91
Project Director:
Marilyn Anesi, R.N., C.N.M.

This project seeks to reduce fetal and neonatal mortality rates in the U.S. territory of American Samoa. The project will focus on increasing the utilization of prenatal health care services by converting the present inaccessible, centralized system of care to a multilocation, community-based system.

Maternity Care Case Management Project
Arizona Department of Health Services
1740 West Adams
Phoenix, AZ 85007
(602) 542-1870

MCHIP
MCJ-046006
10/01/88–09/30/91
Project Director:
Jane Pearson, R.N.

This project seeks to reduce low birthweight rates among project participants by implementing an aggressive case management system that will improve utilization of and compliance with comprehensive prenatal care. The project provides nurse case management services to pregnant women who are enrolled in Medicaid. The project is implemented through contractual arrangements with local agencies who hire the nurse case manager. The local agency also assures that pregnant women receive appropriate risk screening, nutritional counseling, WIC referrals, and prenatal education.

American Indian Comprehensive Maternal Child Health Care Program
California Urban Indian Health Council, Inc.
2422 Arden Way, Suite A-32
Sacramento, CA 95825
(916) 920-0313

MCHIP
MCJ-066005
10/01/87–09/30/90
Project Director:
Karen Tracy, R.N., M.S.

This project aims to reduce the incidence of low birthweight among Native American infants in California by working with Indian health clinics to develop and implement a comprehensive perinatal services program. This model program will include medical, nutrition, health education, and psychosocial components, and is designed to be culturally sensitive. Data collection activities will result in the development of a comprehensive data base on Native American maternal and child health.

Southeast Asian Health Project
United Cambodian Community, Inc.
1432 Atlantic Avenue
Long Beach, CA 90813
(213) 599-2210

MCHIP
MCJ-066029
10/01/89–09/30/92
Project Director:
Lillian Lew, R.D., M.Ed.

The primary goals of this project are: (1) To increase positive health behaviors in prenatal, maternal, and child care among Southeast Asians; and (2) to increase the number of health professionals trained in Asian cultural values and health practices, enabling provision of culturally sensitive health care to Southeast Asians. The program's outreach activities will target the women responsible for family nutrition and the opinion leaders within the Southeast Asian community, introducing new behavioral concepts while encouraging participants to adopt them at their own speed. The Southeast Asian Health Project will provide a model which can be adapted for use among other ethnic groups whose values, customs, and languages are unfamiliar to the existing health care system.

Statewide Comprehensive Maternal and Child Health Services System
Federated States of Micronesia
Department of Human Resources
Kolonia, Pohnpei, FM 96941
(691) 330-2577

MCHIP
MCJ-753881
10/01/87–09/30/90
Project Director:
Kiosi Aniol, M.O., M.P.H.

The overall goal of this project is to establish a statewide MCH services system which will meet the health needs of all the mothers and children of Truk State. This system will include components for improved vital events registration and data management as well as for training of health workers (primarily local midwives). The main focus will be on the extension of prenatal and well-child clinic services to areas not presently served.

Louisiana "Healthy Futures" Program
Louisiana Department of Health and Hospitals
Office of Preventive and Public Health Services
325 Loyola Avenue, Room 612
New Orleans, LA 70112
(504) 568-5395

MCHIP
MCJ-226016
10/01/88-09/30/92
Project Director:
Irene Williams

The "Healthy Futures" Program addresses the high infant mortality rate in Orleans Parish by increasing the number of high-risk pregnant women who receive early and continuous prenatal care services. The project will develop a system of community-based outreach, provide aggressive case management for high-risk women, increase accessibility through alternative sources of public and private care, expand prenatal care to include uniform medical/psychosocial/economic risk assessment, and arrange for Medicaid reimbursement for these services.

Evaluation of the Guidelines for Maternal Transport
Johns Hopkins University
School of Hygiene and Public Health
Department of Maternal and Child Health
624 North Broadway
Baltimore, MD 21205
(301) 955-6802

Research
MCJ-240586
10/01/89-09/30/92
Project Director:
Donna M. Strobino, Ph.D.

The object of this research study is to evaluate the most recent perinatal guidelines for maternal transport. The study evaluates the extent to which the guidelines are followed and, when followed, whether outcomes are improved for the mother and her newborn. The study sample is population based, including transported and nontransported mothers and their newborns from Level I and II Southern New Jersey Perinatal Cooperative hospitals in 1984 and part of 1985.

Healthy Generations of Maryland
Maryland State Department of Health and Mental Hygiene
Family Health Administration
201 West Preston Street
Baltimore, MD 21201
(301) 225-6749

MCHIP
MCJ-246005
10/01/88-09/30/92
Project Director:
Polly Harrison, M.D.

This project seeks to demonstrate the efficacy of family-focused, community-based, prevention-oriented nursing services in reducing the IMR in designated urban and rural areas. An MCH team, consisting of a community health nurse and a social worker, has been established in each of the target areas. Nursing activities include case management, primary intervention, community liaison, client advocacy, and health education. Social workers provide family needs assessments, assistance with access to financial resources, and family and individual counseling. The project serves as a catalyst for redefining the utilization of resources and the delivery of community-based services to Maryland's maternal and child population.

Lawrence Prenatal Support System
Massachusetts Department of Public Health
150 Tremont Street
Boston, MA 02111
(617) 727-5121

MCHIP
MCJ-256007
10/01/88–09/30/91
Project Directors:
Ellen Gibbs, Ed.M.
Sarah Johnson

The goal of this project is to improve prenatal care utilization rates and birth outcomes among high-risk, low-income women, particularly *Latina* women, living in the city of Lawrence. The Lawrence Prenatal Support System will establish a coordinated service system for high-risk pregnant women; demonstrate a model of early and continuous case management which will include advocacy and support by bilingual, bicultural case managers; and coordinate public and private prenatal care services.

Prenatal Care Coordination Project
Minnesota Department of Health
717 Southeast Delaware Street
P.O. Box 9441
Minneapolis, MN 55440
(612) 623-5431 or 623-5166

MCHIP
MCJ-276015
10/10/88–09/30/91
Project Directors:
LaVohn Josten, Ph.D., R.N.
Carolyn McKay, M.D.

This project aims to reduce low birthweight rates among low-income women whose prenatal care is paid for by medical assistance. The project will establish a statewide, locally based prenatal care coordination system that includes comprehensive, risk-appropriate prenatal care provided by a multidisciplinary team of medical care providers and other prenatal health care professionals.

Sharkey-Issaquena Health Alliance
Luke Society—Cary Christian Health Center
1121 Grove Street
Vicksburg, MS 39180
(601) 638-1629

MCHIP
MCJ-288404
10/01/89–09/30/94
Project Director:
Peter A. Boelens, M.D.

The primary purpose of this project is to decrease the rates of teen pregnancy, infant mortality, and low birthweight births in Sharkey and Issaquena Counties. Additionally, the project will seek to facilitate access to care, coordinate perinatal care delivery, improve community understanding and knowledge of health-related matters, and increase community awareness of child abuse. To reach these goals, Cary Christian Health Center staff, working with local caregivers, will implement a comprehensive program which will include a perinatal care network, prenatal and parenting classes, a formal health education program within the schools, an expanded transportation system, and social services in the area of child abuse evaluation.

Evaluation of Healthy Generations Program
University of North Carolina at Chapel Hill
School of Public Health
Maternal and Child Health, CB #7400
Chapel Hill, NC 27599-7400
(919) 966-5981

MCHIP
MCJ-377013
10/01/89-09/30/90
Project Director:
Milton Kotelchuck, M.D.

The goal of this evaluation is to examine the impact of the Healthy Futures and Healthy Generations Programs and their component interventions in three areas: (1) Changes in the accessibility, competence, and capacity of the perinatal health care system; (2) changes in the timing, content, and coordination of perinatal services; and (3) changes in birth outcomes. Case studies will be written for 11 Southern States, tracing the process of the implementation of the Healthy Futures and Healthy Generations Programs into the health care system. The evaluation study will result in knowledge of the success or failure of these programs, assessment of the programs' impact, identification of effective infant mortality interventions, and implications for State and national policy.

Healthy Generations for Healthy Futures in North Carolina
North Carolina Department of Human Resources
Division of Health Services
Maternal and Child Care Section
P.O. Box 2091
Raleigh, NC 27602
(919) 733-3816 or 733-7791

MCHIP
MCJ-376004
10/01/88-09/30/92
Project Director:
Ann Wolfe, M.D., M.P.H.

This project addresses problems such as fragmented clinical services, barriers to enrollment in Medicaid, and lack of support services, all of which contribute to North Carolina's high infant mortality rate. The goal of the project is to reduce infant mortality by increasing prenatal care services and by promoting preventive preconceptional approaches, access to services for infants, and other support services.

Performance System to Reduce Prematurity and Low Birthweight
University of North Carolina at Chapel Hill
Department of Maternal and Child Health, CB #7400
Rosenau Hall
Chapel Hill, NC 27599
(919) 966-5981

MCHIP
MCJ-376009
10/01/87-09/30/90
Project Director:
Jonathan B. Kotch, M.D., M.P.H.

The purpose of this project is to reduce prematurity and low birthweight in North Carolina's Southwest Perinatal Region III. This system provides a mechanism for conducting periodic, ongoing observation of program effectiveness and for monitoring public health staff performance in implementing clinic guidelines.

Perinatal Care Coordination Project
Columbus Health Department
181 South Washington Boulevard
Columbus, OH 43215
(614) 222-6424

MCHIP
MCJ-396009
10/01/88–09/30/91
Project Director:
Carolyn B. Slack, M.S., R.N.

This project seeks to decrease the occurrence of poor perinatal outcomes by improving both the utilization and content of perinatal care services. An interdisciplinary team will work to improve client recruitment, enrollment, and retention procedures while implementing a care coordination service delivery model to better meet client needs.

Family Shelter Project
Philadelphia Department of Public Health
1101 Market Street, Suite 800
Philadelphia, PA 19107
(215) 592-4976

MCHIP
MCJ-426014
10/01/88–09/30/91
Project Director:
Bonnie Strahs

This project addresses the dramatic rise in homelessness and substance abuse, the relationship between the two problems, and the increasing number of homeless families. The Family Shelter Project provides leadership and coordination for a broad range of health, social, and educational services to be provided to pregnant women, mothers, and children in a therapeutic community which has been established within a city shelter for homeless families. In addition, the project has established a professional development collaborative to enhance the capacity of health professionals and those in related professions to serve the homeless, particularly the substance-abusing maternity services population.

Developing a Community MCH System in the Blackstone Valley
Brown University/Memorial Hospital of Rhode Island
Department of Family Medicine
89 Pond Street
Pawtucket, RI 02860
(401) 722-6000, ext. 2236

MCHIP
MCJ-446006
10/01/87–09/30/90
Project Director:
Larry Culpepper, M.D.

This project will develop a network of community organizations involved in the identification of and response to perinatal and early infancy problems and the problems of young families. Specific goals include the development of a community MCH plan, the implementation of a data system for project sites, the integration of MCH programs with ongoing caregiving structures, the implementation of interagency protocols, and the modification of health behaviors and improvement of MCH utilization patterns.

Perinatal Health: Strategies for the 21st Century
National Perinatal Information Center
1 Blackstone Place
668 Eddy Street, Third Floor
Providence, RI 02903
(401) 274-0650

MCHIP
MCJ-446017
10/01/88–09/30/91
Project Director:
Rachel M. Schwartz, M.P.H.

The overall goal of this project is to serve as a focal point in strengthening and improving the organization and delivery of perinatal health services in the United States. To achieve this goal, the project has established three major subgoals: (1) To stimulate interest in what measures should be taken to improve perinatal health; (2) to create an environment for discussing the future of perinatal health; and (3) to establish a national agenda for improving systems of perinatal health care.

South Carolina Partnership for Healthy Generations
South Carolina Department of Health and
Environmental Control
2600 Bull Street
Columbia, SC 29201
(803) 737-4190

MCHIP
MCJ-456001
10/01/88–09/30/92
Project Director:
Marie C. Meglen, M.S., C.N.M.

The goal of this project is to reduce the infant mortality rate in South Carolina. To do so, the project will work to improve access to early and continuous prenatal care by addressing individual and systems problems; establish public/private task forces in six counties; ensure coordinated systems of perinatal care; and develop a priority programs agenda for the legislature and Maternal, Infant and Child Health Council (MICH) member groups.

Community Support Program for Early Discharged Mothers and Infants
Thomason Hospital
4814 Alameda
El Paso, TX 79905
(915) 544-1200

MCHIP
MCJ-486031
10/01/89–09/30/92
Project Director:
C. Antonio Jesurun, M.D.

Due to a shortage of obstetrical beds, Thomason Hospital discharges healthy mothers at 24 hours postpartum, while well newborns are kept in the nursery 48–72 hours after birth for monitoring. The resulting separation disrupts the mother-infant attachment process, halts health and parenting instruction, and interrupts the continuity of care. The Community Support Program will identify healthy expectant mothers during prenatal care and prepare them for early discharge, allow the release of well newborns with their mothers, and monitor mothers and infants through 2 weeks postpartum. Program staff will track the health of the infants through the 72-hour newborn assessment, conduct home visits where necessary, and operate a telephone hotline for health and parenting questions.

Maternal and Infant Care Access Project
Texas Department of Health
1100 West 49th Street
Austin, TX 78756
(512) 458-7700

MCHIP
MCJ-486002
10/01/88-09/30/92
Project Director:
Walter P. Peter, Jr., M.D.

The Maternal and Infant Care Access project seeks to overcome fragmentation of perinatal care services through interdepartmental/interagency planning and cooperative efforts and through case management of high-risk pregnant women and their children. Interagency coordination is also reflected in statewide marketing efforts for early and continuous prenatal care through joint pamphlets, videos, and other materials.

Infant Health

Reducing Mortality and Morbidity

Infant Mortality Review
Arkansas Department of Health
4815 West Markham
Little Rock, AR 72205-3867
(501) 661-2251

MCHIP
MCJ-056027
10/01/89–09/30/91
Project Director:
Deborah Bryant, M.D.

In spite of concentrated perinatal and neonatal services in Little Rock, the infant mortality and low birthweight rates in the surrounding area of Pulaski County are higher than the State average. The goal of this project is to develop an infant mortality review model in Pulaski County that will be utilized as part of a needs assessment, program planning, and evaluation process directed toward coordinating perinatal care and reducing infant mortality. The infant mortality review will include not only traditional case reviews and medical audits, but also data regarding public policies and assistance programs, the accessibility of services, cultural beliefs, and personal knowledge and motivation.

Hepatitis B Screening Access Project for Southeast Asians
Asian American Health Forum
835 Jackson Street, Suite 407
San Francisco, CA 94133
(415) 391-8494

Genetics
MCJ-061008
10/01/88–09/30/91
Project Director:
Sandy Tong

The goal of this project is to increase access to hepatitis B screening and immunization for Southeast Asian pregnant women and their newborns. The primary objectives for the first year include identifying sites in which the project will be implemented; screening and counseling up to 400 Southeast Asian pregnant women and immunizing their newborns as needed; gathering screening results and immunization data; and establishing a relationship with a pharmaceutical supplier in order to obtain vaccines by donation.

Laboratory Workup of Jaundiced Newborns: A Reevaluation
University of California at San Francisco
400 Parnassus Avenue
A-205, Box 0314
San Francisco, CA 94143
(415) 476-6451

Research
MCJ-060573
11/01/88–10/31/90
Project Director:
Thomas B. Newman, M.D.

This study seeks to evaluate the validity of the standard textbook recommendations for the clinical laboratory approach to the diagnosis of jaundice in newborn infants. Since standards of care are based on traditional recommendations, the study proposes to look at the specificity, sensitivity, and positive predictive value of each of the routine laboratory tests recommended for the evaluation of jaundiced infants.

Infant Mortality in Hartford, Connecticut: A Community-Centered Review
Hispanic Health Council
96 Cedar Street, Suite 3A
Hartford, CT 06106
(203) 527-0856

MCHIP
MCJ-096011
10/01/88–09/30/90
Project Director:
Georgine Burke, Ph.D.

This project will study fetal and neonatal deaths occurring among the 1989 birth cohort of residents of the city of Hartford. The Hartford Infant Mortality Review will seek to: (1) Identify factors contributing to fetal and neonatal mortality which can be prevented by changes in prenatal and perinatal behaviors and in policies and programs; (2) develop policy recommendations to reduce these problems; and (3) initiate efforts to implement the recommended changes. Preliminary conclusions, based on review of specific sets of data, will be presented to an expert health panel. The project will serve as a model for community-based review of infant mortality which can be replicated in other urban areas of the State.

Identification of Risk for SIDS: Subsequent Siblings
American SIDS Institute
275 Carpenter Drive
Atlanta, GA 30328
(404) 843-1030

Research
MCJ-130516
04/01/85–03/31/90
Project Director:
Alfred Steinschneider, M.D.

The primary objective of this research is to evaluate in subsequent siblings the effectiveness of neonatal measures of respiratory instability obtained during feeding and sleep, as well as measures of passive muscle tone, in identifying infants who are at risk for prolonged apnea (no respiratory activity for more than 18 seconds) or bradycardia (sudden drop in heart rate to below 80 bpm for 5 beats or more). It is hoped that the physiological observation of feeding and sleep, and the assessment of muscle tone, under carefully controlled conditions, might provide valid criteria for the early identification of subsequent siblings who would benefit from home monitoring.

REACH Futures
University of Illinois at Chicago
Maternal-Child Health Nursing
1740 West Taylor Street
Chicago, IL 60612
(312) 996-4125

MCHIP
MCJ-178507
10/01/89–09/30/94
Project Director:
Cynthia Barnes-Boyd

This project aims to establish an innovative, multiagency service delivery model that will prevent neonatal and postneonatal morbidity and mortality in a low-income, inner-city Chicago community. Project staff plan to develop a team of trained community members who, under the supervision of professional nurses, will serve as health advocates by conducting home visits to promote primary health care for mothers and infants. The service team will offer home-based health assessments and education designed to help women have healthy pregnancies and births and to nurture healthy infants.

Marion County Infant Mortality Review
Indiana State Board of Health
Bureau of Family Health Services
Division of Maternal and Child Health
1330 West Michigan Street
Indianapolis, IN 46206
(317) 633-0170

MCHIP
MCJ-186028
10/01/89-09/30/91
Project Director:
Denise E. Ingram, M.D., Ph.D.

Under this program, the Infant Mortality Review Committee, composed of professionals from multiple disciplines, will study fetal and infant deaths in Marion County, Indiana. Project efforts will focus on two primary goals: (1) To reduce infant mortality and low birthweight rates in Marion County; and (2) to demonstrate a community-based multidisciplinary review model that identifies multiple factors which contribute to fetal, neonatal, and postneonatal mortality in high-risk areas and serves as a working model for other communities.

Neonatal Nutrition Training Program
Indiana University
James Whitcomb Riley Hospital for Children
Department of Nutrition and Dietetics
1 Children's Square
Indianapolis, IN 46202
(317) 274-9912

Training
MCJ-000982
10/01/88-09/30/93
Project Director:
Karyl A. Rickard, R.D., Ph.D.

The Neonatal Nutrition Training Program provides: (1) A biennial high-risk infant and neonatal nutrition course of national scope for physicians, dietitians/nutritionists, and nurses; (2) annual 4-month clinical fellowships in neonatal-pediatric nutrition for three dietitians/nutritionists; and (3) annual 1-week clinical update practicums for eight dietitians in intensive care nurseries or nutritionists responsible for the followup care of neonates in the community. The intense education programs for dietitians/nutritionists provide didactic information via medical-nutritional lectures, interdisciplinary seminars, and patient care rounds; and guided clinical experiences in managing high-risk infants.

Intensive Course in Pediatric Nutrition
University of Iowa
Department of Pediatrics
College of Medicine
Iowa City, IA 52242
(319) 356-2832

Training
MCJ-000256
07/01/88-06/30/93
Project Director:
Samuel J. Fomon, M.D.

A week-long course in pediatric nutrition is presented twice weekly by pediatricians, dietitians, nutritionists, nurses and other health professionals at the University of Iowa. Individuals who attend the course are primarily dietitians and nutritionists working in community health settings; however, hospital-based health professionals, including physicians and nurses, also attend. In plenary and small-group sessions, topics of current interest in pediatric nutrition are reviewed, and, when warranted on the basis of available evidence, specific recommendations for nutritional management are presented. A packet of presentation outlines, reproductions of visual aids, and literature references is revised and updated for each course, and a general reading list is provided.

Home Intervention with Infants with Failure to Thrive
University of Maryland School of Medicine
Department of Pediatrics
660 West Redwood Street
Baltimore, MD 21201
(301) 328-2185

Research
MCJ-240568
04/01/88–03/31/90
Project Director:
Maureen M. Black, Ph.D.

The primary goal of this 5-year project is to measure the impact of a home intervention program on the growth and development of infants with failure to thrive (FTT). It is hypothesized that, among families with a child with FTT, those families who receive home-based, ecologically oriented intervention over 1 year will show improvements in their child's growth, health, cognitive development, emotional development, motor development, and behavior, as mediated by more responsive parent-infant interactions and more effective caregiving behaviors.

Case-by-Case: Boston's Infant Mortality Review Project
Trustees of Health and Hospitals of the
City of Boston, Inc.
1010 Massachusetts Avenue
Boston, MA 02118
(617) 424-5180

MCHIP
MCJ-256026
10/01/89–09/30/91
Project Director:
Alonzo Plough, Ph.D., M.D.

The goal of the Case-by-Case Infant Mortality Review Project is twofold: (1) To develop, implement, and evaluate a process to review infant deaths in order to identify contributing factors which are preventable or amenable to change; and (2) to develop, implement, and evaluate a process whereby infant mortality review information can be translated into successful, action-oriented strategies aimed at eliminating racial disparities in infant mortality and other health risks and outcomes in Boston. Over the 2-year grant period, the project will review a random sample of 80 infant deaths occurring to Boston residents between July 1, 1989, and June 30, 1991. Aggregated review information will be translated into action-oriented recommendations and strategies for reducing infant deaths in Boston.

Infants of Depressed Adolescent Mothers
Boston City Hospital
818 Harrison Avenue
Boston, MA 02118
(617) 424-4235

Research
MCJ-250559
12/01/87–02/28/90
Project Director:
Howard C. Bauchner, M.D.

The objective of this study is to determine whether or not infants of depressed adolescent mothers have poorer outcomes than infants of nondepressed adolescent mothers. This study examines the following hypotheses: (1) Approximately 40 percent of adolescents who have children will be depressed during the first year of their infants' lives; (2) other maternal characteristics which place young children at risk, such as drug use, cigarette smoking, alcohol consumption, and lack of social support, will be significantly associated with maternal depression; and (3) infants of depressed adolescent mothers will have poorer development, decreased growth, and more accidents than infants of adolescents who are not depressed, after controlling for confounding variables.

Mississippi Postneonatal Death Impact Project
Mississippi State Department of Health
P.O. Box 1700
Jackson, MS 39215-1700
(601) 960-7464

MCHIP
MCJ-283809
10/01/86-06/30/90
Project Director:
Judith K. Barber, M.S.S.W., A.C.S.W.

This project aims to reduce infant mortality by improving the health status of at-risk families by means of increased access to health care services. Home-based case management and an information and referral service were established. Infant death review conferences provided training for professionals and estimates of the proportion of postneonatal mortality resulting from lack of access to and utilization of health care services.

Infant Mortality Review, Mott Haven, New York City
New York City Department of Health
Bureau of Maternity Services and Family Planning
280 Broadway, Room 303
New York, NY 10007
(212) 566-5347

MCHIP
MCJ-366012
10/01/88-09/30/90
Project Director:
Karla Damus, Ph.D.

This project seeks to implement a comprehensive infant mortality review process in the Mott Haven community, using a systems approach. Multiple data sources will be used to determine the factors associated with each fetal and infant death occurring to Mott Haven residents between January 1989 and September 1990. Approximately 140 cases will be reviewed during the 2-year project period. Data for an additional 168 control infants will be reviewed as part of a matched multiple control design study for a subset of fetal and infant deaths occurring between July 1989 and September 1990 to residents of Mott Haven delivering at Lincoln Hospital. Based on the infant mortality review findings, specific recommendations for strategies and interventions will be made.

Multidimensional Health Status Index for Infants
Rochester General Hospital
Department of Pediatrics
1425 Portland Avenue
Rochester, NY 14621
(716) 338-4406

Research
MCJ-360571
10/01/88-09/30/90
Project Director:
Kenneth M. McConnochie, M.D., M.S.

The primary objective of this project is to develop and validate a multidimensional index of infant health status (INSTAT), ultimately to be based on diagnostic information routinely collected through the encounter forms used in pediatric practices. The index is based on a conceptual model that assumes multiple determinants of health and multiple risk factors in disease etiology. It is argued that the multidimensional index as proposed could be used for various purposes, such as to conduct needs assessments in population groups and communities and to act as the dependent variable in evaluation and epidemiologic studies.

Preventive Primary Care Services for Children in Substance-Abusing Families
Children's Hospital of Buffalo
219 Bryant Street
Buffalo, NY 14222
(716) 878-7288

MCHIP
MCJ-368209
10/01/89-09/30/94
Project Directors:
Maureen Montgomery, M.D.
Karen Blount, R.N.

This project is designed to address the high-risk health status of infants exposed to substance abuse in the prenatal period and the frequent inability of substance-abusing women to parent and nurture their children. A pediatrician and nurse practitioner will provide primary care to these women and their infants, which will include parent education classes, well-child visits, and periodic neurodevelopmental and behavioral assessments. In addition, the program will provide intensive, home-based support through weekly visits by culturally similar "resource mothers" in an effort to eliminate the need for foster care placement.

Universal Hepatitis B Testing of Pregnant Women and Followup Treatment of Infants
New York State Department of Health and
Health Research, Inc.
Center for Community Health
Corning Tower
Albany, NY 12237
(518) 473-4270

MCHIP
MCJ-367012
05/01/89-09/30/90
Project Director:
Lloyd Novick, M.D.

This project promotes testing and counseling of all pregnant women in New York State for hepatitis B and treatment of all infants born to women who are positive for hepatitis B surface antigen (HBsAG). In New York State, it is estimated that 1 percent of the annual live births (2,600 infants) are to women infected with hepatitis B. Given the current documented perinatal hepatitis B virus transmission rates, approximately half of the infants (1,300 annually in New York State) born to infected women will develop infection, and each year 90 percent of these (approximately 1,200 annually in New York State) will become chronic hepatitis B virus carriers.

Prediction of Outcome of Early Intervention in Failure to Thrive
Case Western Reserve University
University Hospitals
2065 Adelbert Road
Cleveland, OH 44106
(216) 459-3745

Research
MCJ-390557
11/01/87-10/31/90
Project Director:
Dennis D. Drotar, Ph.D.

This project addresses the need for controlled studies of the psychological and health outcomes of those infants with failure to thrive (FTT) who have received early intervention, in order to assess early developmental delays and family influences which mediate intervention effects. The family, the environment, and the psychological and physical health outcomes of children originally diagnosed with FTT during the first year of life will be compared to a sample of physically healthy infants who are matched by child and family characteristics.

Psychological Sequelae of Bronchopulmonary Dysplasia and Very Low Birthweight
Case Western Reserve University
Rainbow Babies and Children's Hospital
2101 Adelbert Road, Room 373
Cleveland, OH 44106

Research
MCJ-390592
10/01/89-09/30/92
Project Director:
Lynn T. Singer, Ph.D.

This study is a longitudinal, prospective investigation of the medical, social, and developmental correlates of chronic lung disease during the first 2 years of life. Data will be evaluated descriptively as well as through a series of multivariate analyses of variance with repeated measures to describe the functioning of infants with bronchopulmonary dysplasia (BPD) and to understand the developmental interferences imposed by BPD early in life. The proposed research will provide practical information about family and developmental stresses related to lung disease which might be amenable to intervention early in life and will also contribute to our theoretical understanding of the role of chronic illness in child development.

Oregon SIDS Prevention Project
Oregon Department of Human Services
Health Division
Maternal and Child Health
P.O. Box 231
Portland, OR 97207
(503) 229-6382

MCHIP
MCJ-416030
10/01/89-09/30/92
Project Director:
Grant Higginson, M.D.

This project aims to demonstrate that Oregon's postneonatal mortality rate can be improved by identifying infants at higher risk for sudden infant death syndrome (SIDS) and providing intensive nursing intervention to prevent potential SIDS deaths. The region targeted for intervention is Marion County, where 10 percent of the State's SIDS cases occur. Under this program, local public health nurses will screen 340 high-risk infants annually for SIDS. The project outcome objective is to reduce the SIDS rate for Marion County to at or below the State average by 1992.

Long-Term Outcomes of Very Low Birthweight Infants
Children's Hospital of Philadelphia
39th and Chestnut Streets
St. Leonard's Court, Suite 110
Philadelphia, PA 19104
(215) 590-1000

Research
Interagency Agreement with NICHD
6/15/85-6/30/91
Project Directors:
George Peckham, M.D.
Marie McCormick, M.D.

The purpose of this study of the long-term outcomes of very low birthweight (VLBW) infants is to provide longitudinal information on outcomes of infants treated with modern intensive care in multiple settings as these children reach school age. This is an effort to better characterize the health and developmental status of these infants at early school age.

Behavioral Intervention with IUGR Infants
Women and Infants Hospital of Rhode Island
101 Dudley Street
Providence, RI 02905-2401
(401) 274-1100, ext. 1232

Research
MCJ-440569
07/01/88-06/30/91
Project Director:
Cynthia Garcia Coll, Ph.D.

The purpose of this 3-year longitudinal intervention study is to: (1) Examine the effectiveness of a parent-infant based behavioral intervention during the neonatal period to prevent or ameliorate the negative consequences of intrauterine growth retardation (IUGR) on maternal-child sensitivity and infant physical growth, caloric intake, cognitive development, and language development; and (2) examine the mediating effects of cultural context and risk status on the effectiveness of intervention with IUGR infants. The planned intervention is expected to affect outcomes directly by improving caloric intake and indirectly by improving mother-infant interactions.

Fetal and Infant Mortality Review: Understanding Our Problem
South Carolina Department of Health and
Environmental Control
Bureau of Maternal and Child Health
2600 Bull Street
Columbia, SC 29201
(803) 737-4180 or 737-4190

MCHIP
MCJ-456010
10/01/88-09/30/90
Project Directors:
Cathy Melvin Efird, Ph.D.
Ann Donohoe Gates, M.S.P.H.

The goal of this project is to improve the survival rate of infants in South Carolina by analyzing health care financing systems and service delivery problems in an effort to identify those factors which contribute to infant mortality both locally and statewide. Program activities include completing the *Fetal and Infant Death Review Manual* for South Carolina; developing a statewide technical support network; and establishing a mechanism for implementing recommendations made by local area review teams at both the State and local levels.

Neonatal Nutrition Training
Medical University of South Carolina
Department of Pediatrics
171 Ashley Avenue
Charleston, SC 29425
(803) 792-2606

Training
MCJ-009117
07/01/88-06/30/93
Project Director:
William B. Pittard III, M.D.

Improved obstetrical care, as well as management and outcome of neonatal respiratory failure, has resulted in the survival of large numbers of extremely precarious low birthweight infants requiring prolonged nutritional support. Few nutritionists or other health care professionals in the State, region, or Nation have been exposed to the theory or changing technology involved in the care of these infants. The long-term objective of this training project is to update knowledge and expertise in the management of the nutritional needs of antenatal and postpartum women and their infants. This objective will be met in the following ways: (1) A yearly 3-day intensive course in perinatal-neonatal nutrition; (2) four 1-week neonatal nutrition update programs; and (3) 3-month neonatal nutrition clinical fellowships.

Perinatal Outcome Study of the Meharry Cohort
Meharry Medical College
1005 Dr. D.B. Todd, Jr. Boulevard
Nashville, TN 37208
(615) 327-6794

Research
MCJ-477008
01/01/89-12/31/92
Project Director:
Henry Foster, Jr., M.D.

The specific aim of this study is to demonstrate that in a black population with sustained, intergenerational, high socioeconomic status (SES) and equal risk factors, the birthweight distribution and other reproductive outcomes are the same as those which exist for whites in this country. We will examine comparable data for blacks and whites of relatively high sustained SES, for second and third generation black outcome effects. The primary dependent variables will be birthweight, but other perinatal outcome dependent variables will be considered. Independent variables will consist of factors relating to education, income, social status, and nonobstetric health entities.

Infant Mortality Review to Decrease Perinatal Mortality
Utah Department of Health
Division of Family Health Services
P.O. Box 16650
288 North 1460 West
Salt Lake City, UT 84116
(801) 584-8237

MCHIP
MCJ-496013
10/01/88-09/30/90
Project Director:
Thomas J. Wells, M.D., M.P.H.

This project will conduct perinatal case reviews, to include calculation of birthweight-specific perinatal mortality tables for three time periods, in two urban and two rural high perinatal mortality sites. At least one factor contributing to perinatal mortality will be identified at each site and targeted for action through the State Perinatal Health Care Plan, the State Title V agency, and/or the local health department. Two years after project completion, programs addressing contributing factors and a quality assurance plan of the State Perinatal Health Care Plan will be in place.

Infant Health

Newborn Screening for Sickle Cell and Other Genetic Disorders

Alabama Newborn Hemoglobinopathy Screening Project
Alabama Department of Public Health
Bureau of Family Health Services
434 Monroe Street
Montgomery, AL 36130-1701
(205) 261-5052

Genetics
MCJ-011002
10/01/88-09/30/90
Project Director:
Doris M. Barnette, A.C.S.W.

This project seeks to expand Alabama's present newborn screening program. The project objectives are to ensure that: (1) Every newborn will be screened, (2) families of children with hemoglobinopathies will receive medical treatment and social support, and (3) health care providers statewide will receive adequate training regarding the identification and management of sickle cell disease and other hemoglobinopathies.

Arkansas Newborn Sickle Cell Screening Program
Arkansas Department of Health
Bureau of Public Health Programs
4815 West Markham Street
Little Rock, AR 72205-3687
(501) 661-2528

Genetics
MCJ-051002
10/01/88-09/30/90
Project Director:
Deborah Bryant, M.D.

This project seeks to provide hemoglobinopathy screening to all newborns in Arkansas. Under a collaborative program involving several agencies and foundations, the primary physicians and the parents of all newborns who have a significant hemoglobinopathy or are carriers will be notified; infants will be referred for medical evaluation, treatment, followup, and genetic counseling. Inservice programs will be provided to physicians in staff meetings at key hospitals.

Hemoglobinopathy Screening in California
California Public Health Foundation
2001 Addison Street, Suite 210
Berkeley, CA 94704-1103
(415) 644-8200

Genetics
MCJ-061006
10/01/87-09/30/90
Project Director:
George C. Cunningham, M.D.

This project proposes to add a program of hemoglobinopathy screening, education, followup, and counseling to the existing statewide newborn screening program. It will supplement available resources and will provide the following specific elements needed for comprehensive screening: Education of health care providers and the public; implementation of screening policies and procedures regarding thalassemias and other hemoglobinopathies; and development of a hemoglobinopathy registry to support long-term followup and counseling.

Colorado Regional Newborn Screening Program
Colorado Department of Health
Family Community Health Division
4210 East 11th Avenue
Denver, CO 80220
(303) 331-8373

Genetics
MCJ-081003
10/01/89–09/30/90
Project Director:
Robert S. McCurdy, M.D., M.P.H.

The goals of the Colorado Regional Newborn Screening Program are to: (1) Improve the efficiency of the existing Regional Newborn Screening Program in Arizona, Colorado, and Wyoming by improving the automation of its data system; (2) collect information and data germane to the effectiveness and impact of newborn screening and counseling for sickle cell trait; and (3) assess how well informed physicians are about newborn screening for cystic fibrosis (CF), evaluate information physicians have about CF in infancy, ascertain the type of information physicians provide to families concerning CF screening, determine the extent of physician awareness and concern regarding parental emotional responses to CF screening, and understand whatever reservations physicians may have regarding the screening process or the screening itself.

Statewide Program for Universal Newborn Screening of Sickle Cell Anemia and Related Hemoglobinopathies
Connecticut Department of Health Services
Family/Reproductive Health Division
150 Washington Street
Hartford, CT 06106
(203) 566-5601

Genetics
MCJ-091003
10/01/88–09/30/90
Project Director:
Jadwiga Goclowski, R.N., Ph.D.

The goal of this project is to decrease morbidity and mortality in infants at high risk for sickle cell anemias, related hemoglobinopathies, and traits. Through a carefully arranged plan, the Family/Reproductive Health Division, two university hematology and genetics clinics, the medical provider, and the State laboratory are involved in screening newborns and establishing an individual plan for each sick infant for treatment, counseling, and followup.

Newborn Screening and Counseling Program
Howard University
Center for Sickle Cell Disease
2121 Georgia Avenue, N.W.
Washington, DC 20059
(202) 636-7930

Genetics
MCJ-111007
10/01/88–09/30/90
Project Directors:
Roland B. Scott, M.D.
Catherine U. Uzoma, Ph.D., M.P.H.

The purpose of this project is to develop and implement a comprehensive newborn screening program. The program will be designed to: (1) Expand existing services to include education, counseling, and followup testing for families of infants with abnormal hemoglobin trait; (2) assure followup and comprehensive management of infants with clinically significant hemoglobinopathies; and (3) reduce the need for repeated screening in childhood, adolescence, and adulthood.

Counseling and Education for Families of Newborns Identified with Hemoglobinopathies
Florida Department of Health and Rehabilitative Services
Children's Medical Services
1311 Winewood Boulevard
Building 5, Room 118
Tallahassee, FL 32399-0700
(904) 488-1459

Genetics
MCJ-121003
10/01/87-09/30/90
Project Director:
Jennifer Carnes, R.N.

The goal of this project is to develop and implement a comprehensive education program for physicians, nurses, counselors, social workers, health educators, and other health care providers which will enable them to provide information to those identified as having sickle cell trait by the statewide newborn screening program. Community outreach and educational activities will also be conducted.

Improved Newborn Screening for Hemoglobinopathies
Georgia Department of Human Resources
Division of Public Health
Laboratory Unit, Room 13-H
47 Trinity Avenue, S.W.
Atlanta, GA 30334
(404) 656-4850

Genetics
MCJ-131005
10/01/89-09/30/90
Project Director:
Christine Papadea, Ph.D.

Georgia's newborn screening program for hemoglobinopathies is presently targeted at infants of designated ethnic/racial groups considered to be at high risk for sickle cell anemia and related hemoglobinopathies. Initial data suggest that only about 80 percent of the target population is being tested and reported to the State. This retrieval failure is due, in part, to the fact that two types of neonatal blood specimens—liquid cord for hemoglobins and heel-prick on filter paper for metabolic disorders—must be collected. For various reasons, cord blood samples are not always obtained. This study will determine whether filter paper blood spots collected in the statewide newborn screening program for metabolic disorders can be used in an isoelectric focusing technique to screen for abnormal hemoglobins.

Illinois Project for Statewide Screening and Followup of Newborns for Hemoglobinopathies
Illinois Department of Public Health
535 West Jefferson
Springfield, IL 62761
(217) 782-2736

Genetics
MCJ-171003
10/01/87-09/30/90
Project Director:
Stephen Saunders, M.D.

The goal of this project is to enable clients with hemoglobinopathies and their families to improve their quality of life. Specifically, the project expands the current infant screening program to include screening for hemoglobinopathies, facilitate followup services, provide parents of affected children with counseling, and increase health care provider knowledge regarding hemoglobinopathies.

Iowa Sickle Cell and Other Major Hemoglobinopathies Screening and Followup Program: Patient Tracking and Monitoring
University of Iowa Hospitals and Clinics
Department of Pediatrics
Division of Pediatric Hematology
Iowa City, IA 52242
(319) 356-4830

Genetics
MCJ-191003
10/01/88-09/30/90
Project Directors:
Pedro A. de Alarcon, M.D.
Richard P. Nelson, M.D.

This project supports the patient tracking and monitoring component of the Iowa Hemoglobinopathy Program. The four main objectives are to (1) develop a computer-based data management system for hemoglobinopathy screening; (2) ensure the transfer of data from the screening program to the statewide comprehensive care centers and to the regional genetic consultation service and Child Health Specialty Clinics; (3) facilitate communication between program staff and community health professionals; and (4) disseminate the data management system to other States.

Neonatal Screening for Sickle Cell Disease and Sickle Cell Trait
Kansas Department of Health and Environment
Bureau of Family Health
900 Southwest Jackson Street, 1005 N
Topeka, KS 66612-1290
(913) 296-1300

Genetics
MCJ-201002
10/01/89-09/30/90
Project Director:
Azzie Young, Ph.D.

The goal of this project is to initiate a neonatal screening, diagnosis, and treatment program for sickle cell trait and sickle cell disease by January 1, 1990. The objectives of the project are to: (1) Develop the screening capabilities in the Kansas Department of Health and Environment laboratories by December 1, 1989; (2) define the parameters of the sickle cell anemia and sickle cell trait screening, diagnosis, and treatment program; and (3) develop and implement education and public awareness activities.

Newborn Screening for Sickle Cell Disease
Kentucky Department for Health Services
Division of Maternal and Child Health
Cabinet for Human Resources
275 East Main Street
Frankfort, KY 40621
(502) 564-4830

Genetics
MCJ-211002
10/01/88-09/30/90
Project Director:
Patricia K. Nicol, M.D., M.P.H.

The goal of this project is to reduce infant morbidity and mortality due to sickle cell disease in Kentucky. Project activities will include developing a multilevel sickle cell education effort, establishing a system to identify and refer infants who have sickle cell disease for evaluation and treatment, and developing a coordinated system of followup and management services for patients identified with sickle cell disease or trait.

Louisiana Neonatal Sickle Cell Screening and Followup Project
Louisiana Department of Health and Hospitals
Office of Public Health
Genetic Diseases Program
P.O. Box 60630
New Orleans, LA 70160
(504) 568-5070

Genetics
MCJ-221004
10/01/87–09/30/90
Project Director:
Charles Myers

To reduce morbidity and mortality of infants with sickle cell disease, this project will establish a statewide system which provides both early identification of neonates with the disease and referrals to comprehensive followup services. A sickle cell task force will link agencies in order to improve care for persons with sickle cell disease. Education on sickle cell disease and trait will be provided to health care providers and to parents of affected children.

Newborn Sickle Cell Disease Screening and Followup Program
Maryland Department of Health and Mental Hygiene
Division of Hereditary Disorders
201 West Preston Street
Baltimore, MD 21201
(301) 225-6731

Genetics
MCJ-241006
10/01/88–09/30/90
Project Directors:
Susan Panny, M.D.
Judi Greenblatt, R.N., M.P.H.

The goal of this project is to ensure the provision of high-quality, cost-effective, comprehensive followup health care services for newborns with sickle cell disease and their families. The project will integrate three additional components into the existing newborn screening and followup program: (1) Outreach by sickle cell followup clinics; (2) an extensive educational and training campaign; and (3) a multitask centralized computer registry/data collection and retrieval system.

Implementation of Universal Newborn Screening for Hemoglobinopathies and Congenital Adrenal Hyperplasia of Newborns in Massachusetts
Massachusetts Health Research Institute, Inc.
101 Tremont Street
Boston, MA 02108
(617) 426-6378

Genetics
MCJ-251007
10/01/89–09/30/90
Project Director:
Marvin L. Mitchell, M.D.

This project seeks to implement universal screening of newborns for sickle cell disease and congenital adrenal hyperplasia in Massachusetts; establish with the Boston Sickle Cell Center, a referral network for treatment and counseling of children with sickle cell disease and their families; establish a reporting and followup system to ensure that all newborns with sickle cell disease receive appropriate treatment and families receive counseling; implement a fee-based system that will support screening, treatment, and counseling; and establish a followup system for treatment of congenital adrenal hyperplasia.

Screening of Newborns for Sickle Cell Disease
Trustees of Health and Hospitals of the City of Boston, Inc.
Boston Sickle Cell Center
725 Massachusetts Avenue
Boston, MA 02118
(617) 424-5727

Genetics
MCJ-251006
10/01/88–09/30/90
Project Directors:
Lillian McMahon, M.D.
Marsha Lanes, M.S.

The goal of this project is to establish newborn screening for sickle cell disease in Massachusetts as a mechanism to initiate intensive comprehensive care to reduce morbidity and mortality. The program has established a system of care, treatment, and case management for infants with sickle cell disease which includes distribution of free penicillin. Additional objectives include providing education, genetic counseling, and voluntary carrier testing; and pursuing State legislation and appropriations for universal newborn screening.

Michigan Newborn Screening: A Proposal to Improve Efficiency and Quality of Testing and Followup Services
Michigan Department of Public Health
3500 North Logan Street
Lansing, MI 48909
(513) 335-8067

Genetics
MCJ-261002
10/01/89–09/30/90
Project Director:
Robert Martin, Dr.P.H.

This project seeks to increase the efficiency of followup for sickle cell disease and sickle-hemoglobin C disease so that with over 90 percent of presumptive positive hemoglobin tests the suspected infant is retested and given medical treatment if the diagnosis is established. In addition, the project proposes to increase the efficiency of followup for metabolic diseases (PKU, MSUD, galactosemia, and biotinidase deficiency) from 90 to 95 percent, and hypothyroidism followup from 92 to 95 percent or greater.

Mississippi Hemoglobinopathy Screening, Diagnosis, and Treatment Project
Mississippi State Department of Health
Genetic Screening Program
P.O. Box 1700
Jackson, MS 39215-1700
(601) 960-7619

Genetics
MCJ-281003
10/01/87–9/30/90
Project Director:
Daniel R. Bender

The purpose of this project is to reduce morbidity and mortality due to sickle cell disease and other hemoglobinopathies in Mississippi. Project objectives are to: (1) Establish a statewide program of newborn screening for hemoglobinopathies; (2) provide education and counseling to patients and families identified through the screening program; and (3) demonstrate that the system to be implemented effects significant reductions in unnecessary repeat screenings for hemoglobinopathies.

Missouri Hemoglobinopathies Newborn Screening Project
Missouri Department of Health
1730 East Elm
P.O. Box 570
Jefferson City, MO 64102
(314) 751-6254

Genetics
MCJ-291003
10/01/88–9/30/90
Project Director:
N. Aurita Prince

The goal of this project is to reduce the morbidity and mortality associated with sickle cell disease in the early years of life. To achieve this goal, the project will identify through screening all infants born with hemoglobinopathies; develop resources to provide comprehensive services to these infants; and educate parents, health professionals, and the public about hemoglobinopathies.

New Jersey Sickle Cell Disease Project
New Jersey State Department of Health
Special Child Health Services
CN 364
Trenton, NJ 08625-0364
(609) 292-1582

Genetics
MCJ-341003
10/01/88–9/30/90
Project Director:
Celeste F. Andriot

The goal of this initiative is to reduce morbidity and mortality in New Jersey infants and children with sickle cell disease (SCD). The primary objectives are to increase the availability of comprehensive medical and psychosocial care for infants and children with SCD; to develop a system for evaluating the effects of SCD screening, followup, and comprehensive care on the health status of infants and children with SCD; and to refer all infants identified as having SCD to an SCD treatment center for evaluation and comprehensive care by 8 weeks of age.

Newborn Screening for Hemoglobinopathies
New York State Department of Health
Wadsworth Center for Laboratories and Research
Empire State Plaza
Albany, NY 12201-0509
(518) 473-7552

Genetics
MCJ-361006
10/01/87–09/30/90
Project Director:
Kenneth A. Pass, Ph.D.

The goals of this project are to: (1) Establish an expanded followup system within the New York State Newborn Screening Program; (2) establish a mechanism whereby parents of children found to have trait conditions are uniformly notified of this finding; and (3) establish a mechanism whereby adolescents with sickle cell trait are made aware of their carrier state and provided with sensitive, nondirective counseling.

Phenylalanine and Galactose: Automated Analysis in a Large Newborn Screening Program
New York State Department of Health
Wadsworth Center for Laboratories and Research
Empire State Plaza
Albany, NY 12201-0509
(518) 453-7552

Genetics
MCJ-361008
10/01/89–09/30/90
Project Director:
Kenneth A. Pass, Ph.D.

The goal of this project is to increase the quality and efficiency of the New York State Newborn Screening Program by updating screening methodologies, providing a mechanism for direct transfer of test results to computer data files, reducing clerical and data entry tasks, exploring a more complex data analysis system for early specimen collection, and expanding the variety of galactose metabolism disorders detectable by screening.

Improved Newborn Screening for Congenital Adrenal Hyperplasia
North Carolina State Laboratory of Public Health
Department of Human Resources
306 North Wilmington Street
P.O. Box 28047
Raleigh, NC 27611
(919) 733-3937

Genetics
MCJ-371005
10/01/89–09/30/90
Project Director:
Lindsay Fiske Hofman

This project will add a confirmatory test to newborn screening for congenital adrenal hyperplasia (CAH) that should reduce the false positive rate to very low levels. The goal of this project is to design a screening program for CAH that will work in North Carolina and to accumulate enough data for a statistically significant determination of prevalence in the State. The project will provide information for the State to use in considering the need for and cost-benefit ratio of adding CAH screening to the North Carolina program. Results of this study will also be valuable to other Southeastern States in making their decision about CAH screening.

Oklahoma Newborn Sickle Cell and Galactosemia Screening Project
Oklahoma State Department of Health
Division of Maternal and Child Health
1000 Northeast 10th Street
P.O. Box 53551
Oklahoma City, OK 73152
(405) 271-4471

Genetics
MCJ-401003
10/01/89–09/30/90
Project Director:
Edd D. Rhoades, M.D., M.P.H.

This project proposes to address the problem of morbidity and mortality among infants with sickle cell anemia and the problem of mental retardation and possible death in infants with galactosemia. A comprehensive program of screening and followup will be implemented. Screening will be coordinated by the newborn screening coordinator and the laboratory staff, and will include education of hospital staff and primary health professionals, state-of-the-art specimen analysis and proficiency testing, systematic data entry and referral, and communication of results to appropriate health professionals and parents.

Biochemical Genetic Laboratory
Western Pennsylvania Hospital
4800 Friendship Avenue
Pittsburgh, PA 15224
(412) 578-7348

Training
MCJ-009086
07/01/86-06/30/93
Project Director:
Edwin Naylor, Ph.D.

The purpose of this project is to establish a national screening and confirmation center for the diagnosis of rare cofactor variant forms of phenylketonuria (PKU). This center will provide routine screening of all newborns diagnosed as having either classical PKU or mild hyperphenylalaninemia (HPA). The training of postdoctoral fellows as well as the education of physicians, medical and graduate students, and the public on the nature of PKU cofactor defects are also project objectives.

Development of Statewide Screening for Hemoglobinopathies in Pennsylvania
Pennsylvania Department of Health
Division of Maternal and Child Health
P.O. Box 90
Harrisburg, PA 17108
(717) 787-7440

Genetics
MCJ-421008
10/01/89-09/30/90
Project Director:
Daniel L. Brant, M.S.W.

The goal of this project is to conduct a pilot newborn screening program for sickle cell disease and other abnormal hemoglobins in Philadelphia County during the project period, in preparation for the implementation of statewide hemoglobinopathy screening by October 1, 1990.

Newborn Screening for Early Diagnosis and Treatment of Children with Hemoglobinopathies in Puerto Rico
University of Puerto Rico Medical School
Medical Science Campus
G.P.O. Box 5067
San Juan, PR 00936

Genetics
MCJ-431003
10/01/89-09/30/90
Project Director:
Pedro J. Santiago Borrero, M.D.

The purpose of this project is to screen newborns for hemoglobinopathies as a means of establishing an early diagnosis; initiating prompt comprehensive care; and reducing morbidity, complications, and mortality among affected children. Procedures will be established to provide information, maintain confidentiality of screening results, and provide appropriate program evaluation.

Screening Newborns for Sickle Cell Disease and Other Hemoglobinopathies
Rhode Island Department of Health
Division of Family Health
75 Davis Street
Providence, RI 02908
(401) 277-2312

Genetics
MCJ-441003
10/01/88–09/30/90
Project Director:
Peter R. Simon, M.D., M.P.H.

This project seeks to prevent premature death and childhood morbidity and maximize the ability of individuals with hemoglobinopathies to develop optimally by implementing a cost-effective, universal, statewide newborn screening program. In addition to screening, the program will provide comprehensive health care services, develop multilingual patient education materials, assure access to genetic counseling services, and implement a public awareness campaign.

Followup of Identified Newborns with Hemoglobinopathies
South Carolina Department of Health and Environmental Control
Division of Children's Health
Newborn Screening Program
2600 Bull Street
Columbia, SC 29201
(803) 737-4050

Genetics
MCJ-451004
10/01/87–09/30/90
Project Directors:
Rose Alford
Virginia Herlong

This project has two main goals. The first is to decrease infant and early childhood morbidity and mortality among children with sickle cell disease by implementing a case management system, initiating prophylactic antibiotics before infants reach 4 months of age, arranging for specialty medical services, and assuring that these infants have a primary care source. The second goal is to identify, counsel, and make referrals for couples at risk for having a child with sickle cell disease.

Information System to Enhance Newborn Screening Services in Tennessee and Mississippi
Tennessee Department of Health and Environment
Bureau of Health Services Administration
100 Ninth Avenue, North
Nashville, TN 37219
(615) 741-7335

Genetics
MCJ-471004
10/01/89–09/30/90
Project Directors:
Susan Erickson, R.N., M.P.H.
Mary Jane Sassaman, M.A., M.T.A.S.C.P.

A comprehensive newborn screening information system is needed to effectively and efficiently monitor the status of all specimens throughout the screening process to minimize the risk that infants with one of these disorders might fall through the cracks. The project goals are to: (1) Ensure that infants are not lost to followup prior to completion of the newborn screening process; (2) improve the efficiency of specimen processing in the State laboratory; and (3) enhance quality assurance measures for the newborn screening program.

Sickle Cell Anemia: DNA for Newborn Screening Followup
Baylor College of Medicine
Institute of Molecular Genetics
Houston, TX 77030
(713) 799-5820

Research
MCJ-480566
04/01/88–03/31/90
Project Director:
Edward R.B. McCabe, M.D., Ph.D.

The objective of this study is to demonstrate the applicability of DNA techniques to newborn screening for sickle cell disease. The current practice in Texas is universal neonatal screening; small samples of blood are dried on filter paper and analyzed by protein electrophoresis. The primary aim of this project is to confirm or exclude the diagnosis of sickle cell disease by DNA genotyping directly from the original newborn screening filter paper. The purported advantages of this approach include earlier, more definitive notification of families with affected neonates.

Texas Department of Health Newborn Screening for Sickle Hemoglobin
Texas Department of Health
1100 West 49th Street
Austin, TX 78756-3199
(512) 458-7355

Genetics
MCJ-481004
10/01/88–09/30/90
Project Director:
Patti Patterson, M.D.

Since 1983, the Texas Department of Health has conducted a newborn screening program for sickle hemoglobinopathies. Program objectives include identifying newborns with significant hemoglobinopathies, ensuring followup medical treatment, providing counseling materials and guidelines to health care providers, and developing educational materials.

Initiation of Hemoglobinopathy Screening in Utah
Utah Department of Health
44 Medical Drive
Salt Lake City, UT 84113
(801) 584-8237 or 584-8300

Genetics
MCJ-491003
10/01/89–09/30/90
Project Directors:
Thomas J. Wells, M.D., M.P.H.
Susan L. Mottice, Ph.D.

In this project, all infants born during the study period will be screened for hemoglobinopathies using isoelectric focusing. Infants with abnormal hemoglobin will be identified and their families given appropriate counseling. A coordinated system of community resources will be established for followup of affected infants. The prevalence of hemoglobin carriers and disease will be determined. Data obtained from this study will be used to justify expansion of the current newborn screening program.

Statewide/Areawide Genetic Services
Virgin Islands Department of Health
P.O. Box 520
Christiansted
St. Croix, VI 00802
(809) 778-6567

Genetics
MCJ-521001
05/01/86-04/30/90
Project Director:
Cora L.E. Christian, M.D., M.P.H.

The goal of this project is to identify, as early as possible, any genetic disorders within the Virgin Islands population. Specifically, the project will implement laboratory screening; training and education of nurses, laboratory personnel, and physicians; liaison relationships and linkages with community groups; and genetic testing and evaluation of newborns and pediatric age groups.

Development and Implementation of a Comprehensive Newborn Screening Program for Sickle Cell Diseases
Virginia Department of Health
Division of Maternal and Child Health
109 Governor Street
Richmond, VA 23219
(804) 786-7367

Genetics
MCJ-511002
10/01/87-09/30/90
Project Director:
Alice S. Linyear, M.D., M.P.H.

The goal of this project is to reduce morbidity and mortality from sickle cell diseases in infants and young children in Virginia. Project objectives are to: (1) Expand an existing, limited pilot newborn screening program; (2) conduct transition activities to add the pilot screening program to the current newborn metabolic screening tests; and (3) introduce the screening program to the professional community and public though extensive education.

Infant Health

Breastfeeding and Infant Nutrition

Alameda County Infant Feeding Project
Alameda County Health Care Services Agency
499 Fifth Street
Oakland, CA 94607
(415) 268-2626

MCHIP
MCJ-063857
10/01/86-09/30/90
Project Directors:
Janis Burger, M.P.H., R.D.
Art Reingold, M.D.

This project works with low-income minority women from areas with high infant mortality rates who give birth at a county public hospital. The project's goals are to maintain breastfeeding rates at 3 and 6 months postpartum, document significant factors influencing the decision to breastfeed in this population, and report on the correlation between infant feeding methods and the incidence of infant mortality. The first goal will involve staff training, community outreach, and comprehensive breastfeeding counseling. The last two goals will involve a study of approximately 2,000 women.

Lactation Management Continuing Education Project
University of California at San Diego
Department of Pediatrics
225 Dickinson Street, H-664A
San Diego, CA 92103
(619) 295-6054 or 295-5192

Training
MCJ-009108
10/01/87-09/30/90
Project Directors:
Suzanne D. Dixon, M.D.
Audrey J. Naylor, M.D., M.P.H.

The purpose of this project was to enlarge and enhance the professional competencies of Title V MCH personnel in lactation management. This was accomplished by identifying multidisciplinary teams to participate in a 6-day training course to support them in the development and implementation of one major outreach effort. A compendium of the variety of approaches to this effort was compiled as a resource for future program development. A curriculum will be developed as a product of these efforts to support further outreach efforts at lactation management training.

Infant Feeding and Growth: U.S.-Related Pacific Islands
University of Hawaii
School of Public Health
1960 East-West Road
Honolulu, HI 96822
(808) 948-8832

Training
MCJ-009106
10/01/87-09/30/90
Project Director:
Gigliola Baruffi, M.D., M.P.H.

Declining incidence and duration of breastfeeding, inappropriate weaning practices, widespread malnutrition, lack of systematic feeding and growth data, and lack of health professional knowledge and skills related to these problems are addressed by this 3-year continuing education project serving 9 U.S.-related Pacific Island countries and states. Physician or medex-nurse teams are being prepared to serve as training and consultation resources on human lactation, infant feeding, and growth monitoring within each jurisdiction. Collaborative linkages are maintained with the MCH program coordinators from each jurisdiction who are providing advisory, monitoring, and evaluation functions for the project, and with the Pacific Basin MCH Resource Center for the development and dissemination of information and materials.

Conference on Formula Preparation for Infants in Health Care Facilities
American Dietetic Association
Council on Practice/Pediatric Nutrition Practice Group
216 West Jackson Boulevard, Suite 800
Chicago, IL 60606-6995
(312) 899-4814

MCHIP
MCJ-176020
02/01/89–09/30/90
Project Director:
Lorraine Partlow

The goal of this project is to develop and publish a document entitled *Formula Preparation for Infants in Health Care Facilities*, which is based on the most recent scientific research. To reach this goal, the project will: (1) Produce technical papers concerning issues relating to infant formula preparations in health care facilities; (2) develop written guidelines based on these papers; (3) obtain endorsement of the guidelines from professional organizations; and (4) publish and disseminate a document based on the papers and guidelines.

Indiana's Breastfeeding Promotion Program
Indiana State Board of Health
1330 West Michigan Street
P.O. Box 1964
Indianapolis, IN 46206-1964
(317) 633-8447

MCHIP
MCJ-183822
10/01/86–12/31/89
Project Director:
Division of Maternal and Child Health

This project seeks to increase the percentage of infants who are breastfed. Activities include developing and implementing industry policies that support working, breastfeeding women; conducting a public media campaign and establishing a toll-free hotline; counseling and educating low-income and minority women through WIC and MCH programs; and providing professional education.

Study Group on Human Lactation and Breastfeeding
University of Rochester
Department of Pediatrics
601 Elmwood Avenue
P.O. Box 777
Rochester, NY 14642
(716) 275-0088 or 275-4354

Training
MCJ-009104
10/01/87–09/30/90
Project Director:
Ruth A. Lawrence, M.D.

This project is designed to support the efforts of OMCH to assure that reliable information on matters relating to human lactation and breastfeeding is readily available to professionals both in State Title V programs and in the community at large. The project's regularly updated computer system includes an extensive bibliography and current information on drugs in breast milk, breast anatomy, conditions of the mother and infant and whether they impinge on breastfeeding, lactation management, failure to thrive, milk banking, special problems of the premature infant, nutritional requirements for lactating women, psychological bonding, and community interactions which increase the rate of breastfeeding.

Statewide Action Plan to Promote Breastfeeding
South Carolina Department of Health and
Environmental Control
Division of Children's Health
2600 Bull Street
Columbia, SC 29201
(803) 734-4610

MCHIP
MCJ-453844
10/01/86–11/30/89
Project Director:
Robert H. Buchanan, Jr.

The purpose of this project is to increase the number of low-income and black women in South Carolina who breastfeed. To reach this goal, the project has convened a statewide advisory council, developed promotional materials, encouraged active support of breastfeeding from physicians providing prenatal care, evaluated practices in hospitals that influence breastfeeding, provided inservice training for nurses, and developed support groups (primarily for WIC clients) in each county.

Tennessee Breastfeeding Promotion Project
Tennessee Department of Health and Environment
C2-233 Cordell Hull Building
Nashville, TN 37247-0101
(615) 741-7218

MCHIP
MCJ-473813
10/01/86–09/30/90
Project Director:
Minda Lazarov, M.S., R.D.

This is a comprehensive breastfeeding promotion program involving both the public and private sectors of the medical community. The activities and materials provided in the Tennessee Department of Health and Environment's *Breastfeeding Promotion: A Handbook for Public Health Professionals* have been employed to increase the incidence and duration of breastfeeding among low-income women in five rural counties. Individual and group counseling, networking with the private sector, peer counseling, participant incentive programs, and a community awareness program have been implemented.

Acculturation, Psychosocial Predictors, and Breastfeeding
University of Texas Medical Branch at Galveston
Department of Pediatrics
Route C-51
Galveston, TX 77550-2774
(409) 761-1139

Research
MCJ-480555
04/01/87–03/31/90
Project Director:
David Keith Rassin, Ph.D.

The long-term objectives of this project are to increase the incidence and maintenance of breastfeeding in a United States-Mexico border population, to identify the reasons mothers choose to breastfeed, to determine factors important to the maintenance of breastfeeding, and to study infant health and nutritional status as a function of breastfeeding. A number of psychosocial variables will be measured to assess their importance in the initiation of breastfeeding. These data will be analyzed within ethnic groups by degree of acculturation.

Infant Health

Parenting

Interaction and Support: Mothers and Deaf Infants
Gallaudet Research Institute
800 Florida Avenue, N.E.
Washington, DC 20002
(202) 651-5206

Research
MCJ-110563
10/01/87-09/30/90
Project Director:
Kathryn Meadow-Orlans, Ph.D.

This research is designed to investigate the impact of early deafness on the interaction of deaf infants and their normally hearing mothers in the first 18 months of the child's life. Specifically, the study focuses on the relationships between the face-to-face interaction of these mothers and infants and the infants' motivation to engage the physical environment, their ability to cope with interactive stress, and their developing communicative competence. These relationships are viewed within the context of family response to the diagnosis of deafness and available support from internal and external sources.

Promotion of Healthy Behaviors
Saint Joseph's Medical Center
Women's and Children's Services
811 East Madison
P.O. Box 1935
South Bend, IN 46634-1935
(219) 232-2110

MCHIP
MCJ-183342
10/01/87-9/30/90
Project Director:
Joette Wells

This parent education project aims to teach to parents or caregivers of children under 3 years of age ways to reduce stress, improve problem-solving skills, and develop stronger parent-child relationships. Seminars, group sessions, a newsletter, and materials directed at low-income parents and parents of varying cultural backgrounds are provided.

Nature, Origins, and Consequences of Concepts of Parenting
Iowa State University
Department of Sociology and Anthropology
107 East Hall
Ames, IA 50011
(515) 294-9894

Research
MCJ-190572
10/1/88-09/30/90
Project Director:
Ronald L. Simmons, Ph.D.

This study investigates the nature, origins, and cohsequences of adult and adolescent views of the role of the parent (conceptions of parenting). Specifically, the study aims to: (1) Investigate the nature of conceptions of parenting, identifying various dimensions and components; (2) analyze the manner in which various dimensions of conceptions of parenting influence parental behaviors, especially those behaviors which have been shown to affect the physical and mental health of children; and (3) identify the origins or determinants of variations in conceptions of parenting.

Education and Support Promotion Project
Health Start, Inc.
640 Jackson Street
St. Paul, MN 55101
(612) 221-3673

MCHIP
MCJ-273544
10/01/87–9/30/90
Project Director:
Dory Hyde

This project seeks to reduce infant morbidity and the incidence of child abuse, neglect, and failure to thrive by enhancing the parenting skills of high-risk mothers through intensive education, support, and related intervention services. This will involve the services of physicians and an interdisciplinary team including a social worker, health educator, nutritionist, pediatric nurse practitioner, public health nurse, and parent educator.

Determinants of Adverse Outcome Among Toddlers of Adolescent Mothers
Research Foundation for Mental Hygiene, Inc.
New York State Psychiatric Institute
722 West 168th Street
New York, NY 10032
(212) 960-2298

Research
MCJ-360540
11/01/86–10/31/91
Project Directors:
Gail A. Wasserman, Ph.D.
Virginia Rauh, Sc.D.

This project extends our present work in understanding the sources of psychosocial risk to adolescent mothers and their infants. This project has four specific aims: (1) To extend the current longitudinal study of mothers and infants to include a third year of followup at age 3; (2) to more fully explore the role of extended family and caregiving environments, especially conflict and disorganization; (3) to examine the impact upon early development of psychiatric diagnosis of depressive illness in mothers and alternate caregivers; and (4) to expand our assessment of early developmental competence of children to include measures of emotional/behavior problems.

Study of Home Visitation for Mothers and Children
University of Rochester Medical Center
Department of Pediatrics
601 Elmwood Avenue
Rochester, NY 14642
(716) 275-3738

Research
MCJ-360579
09/30/88–08/31/93
Project Director:
David L. Olds, Ph.D.

This study seeks to determine the effectiveness of prenatal and postpartum nurse home visitation services as a means of enhancing the life course development, social resources, and caregiving skills of parents living in a high-risk urban environment, and to ascertain whether these services can prevent a wide range of health and developmental problems in their children. It is hypothesized that the home visitation program promotes the health and well-being of the participating women and children, and that the effectiveness of the program is greater for women and children at greater risk for the particular problems under consideration. It is also hypothesized that the financial investment in prenatal and postpartum nurse home visitation will be recovered by preventing subsequent costs associated with maternal and child dysfunctions.

Mothers Offering Mothers Support
Surry County Health Department
118 Hamby Road
P.O. Box 1062
Dobson, NC 27017
(919) 374-2131

MCHIP
MCJ-373713
10/01/88-9/30/91
Project Director:
Marjorie Chilton

The purpose of the MOMS project is to provide guidance and a role model for teen parents in order to ensure a better future for their children. Project goals include improving the perinatal outcome of participating women, improving parenting skills, promoting positive family relationships, and improving the mothers' self-esteem.

Risk Detection Using Observations of Interaction
University of North Carolina at Chapel Hill
Department of Pediatrics
Chapel Hill, NC 27599

Research
MCJ-370588
10/01/89-09/30/91
Project Directors:
Julie A. Hofheimer, Ph.D.
M. I. Appelbaum, Ph.D.

This research project involves an examination of the clinical utility and psychometric properties of an observation system designed to assess mother-infant interaction from birth through the first 2 years of life. The measure was developed and field-tested at the former National Institute of Mental Health (NIMH) Clinical Infant Research Unit. The measure's purpose is to describe several critical aspects of the mother-infant relationship, especially in dyads at high risk for dysfunctional development. The project goals are to: (1) Demonstrate the clinical utility and quality of measurement in systematic observations to determine how biomedical and psychosocial characteristics of the infant, mother, and caregiving environment interact to produce varied developmental outcomes; and (2) present a refined measure for screening by practitioners in the field.

Listening Partners: Psychosocial Competence and Prevention
University of Vermont
Department of Psychology
Burlington, VT 05405
(802) 656-2680

Research
MCJ-500541
10/01/86-09/30/90
Project Directors:
Lynne A. Bond, Ph.D.
Mary Belenky, Ed.D.

The Listening Partners Program examines the intellectual and ethical development of rural, isolated, impoverished mothers of children under 7 years of age. It investigates the relationship between these characteristics and the women's self-esteem, social support, and parenting strategies, and the development of the women's preschool-age children. The project implements and evaluates a preventive intervention that provides women opportunities for sustained, high quality dialogue with peers. These experiences are designed to promote the women's intellectual and ethical development, thereby supporting the development of constructive parenting concepts and strategies that, in turn, have been associated empirically with fostering child cognitive and socioemotional development.

Adolescent Mothering and Preschool Behavior Problems

University of Washington
Child Development and Mental Retardation Center
Seattle, WA 98195

Research
MCJ-530589
10/01/89-09/30/92

Project Directors:
Susan J. Spieker, Ph.D.
Robert J. McMahon, Ph.D.

Children of adolescent mothers are at greater risk for the development of behavior problems than are children of adult mothers, even when factors related to social status are controlled. This conclusion is based on three sources of research evidence: Epidemiological studies comparing child outcomes by maternal age; observational studies of the quality of adolescent mothering in infancy; and observational studies reporting a higher rate of insecure attachment, especially avoidant attachment in samples of adolescent mothers as compared to samples of adult mothers of both high and low social status. More research is needed, however, because most studies of adolescent mothering and child outcomes do not focus on the largest and most heterogeneous subgroup, which is white adolescents. Births to white adolescents outnumber births to nonwhite adolescents, and white adolescents have a range of socioeconomic backgrounds. These individuals can be expected to show wide variations in adaptation, but little is known about their parenting and their children's outcomes after infancy. The present study will followup 250 adolescent mother-infant pairs with known infant attachment classifications at two assessments in the preschool years.

Child Health

Primary Care/ Preventive Health Services

Tamaiti Malolosi Mo Se Samoa Manula
Nutrition and Dental Intervention Project
American Samoa Department of Health
Public Health Division
Pago Pago, AS 96799
(684) 633-2697

MCHIP
MCJ-606020
10/01/89-09/30/92
Project Director:
Sally M. Livingston, M.P.H., R.D.

Malnutrition is affecting a great number of young children in the U.S. territory of American Samoa. Recent physical examinations on 1,200 preschoolers revealed that 65 percent of the children ages 2 to 6 years are affected by one or more chronic nutritional health problems. Specifically, 24 percent of these children have iron deficiency anemia (which is six times the national prevalence rate among low-income preschoolers), 54 percent are affected with tooth decay (perhaps the highest rate in the Pacific) and over 8 percent are obese. The goal of the project is to reduce to 35 percent the prevalence rate of chronic nutritional health problems among school children ages 2 to 6 years. This will be accomplished by activities to reduce the prevalence of iron deficiency anemia, tooth decay, and obesity.

Project for Attention-Related Disorders
San Diego City Schools
Health Services Department
2716 Marcy Avenue
San Diego, CA 92113
(619) 233-8951

MCHIP
MCJ-068906
10/01/89-09/30/94
Project Director:
Jeffrey Black, M.D.

The goal of this project is to improve the physical and mental health, as well as the educational outcomes, of children with attention deficit disorders by increasing the accessibility, efficacy, relevance, and multidisciplinary integration of diagnostic and therapeutic intervention services. Project staff will develop a network to provide these services to low-income children and youth exhibiting symptoms suggestive of attention deficit disorders. The network will include pediatricians, nurses, school teachers, school support personnel, after school care providers, local mental health providers, and representatives from parent advocacy groups.

Training in the Behavioral/Developmental Aspects of Pediatric Health
University of California at San Francisco
Department of Pediatrics, Box 0314
San Francisco, CA 94143
(415) 476-4575

Training
MCJ-002001
09/01/65-06/30/91
Project Director:
W. Thomas Boyce, M.D.

The purpose of this project is to improve children's health by including in their ongoing care the prevention and treatment of behavioral and developmental complications arising in the course of normal growth, illness, or disability. This is to be achieved through a 3-year fellowship training program for selected pediatricians who will be equipped to promote, disseminate, study, and integrate behavioral and developmental pediatrics within the broader scope of child health care. Such training provides a clinical approach which is grounded in a knowledge of child and family development, communication and interviewing skills, and the psychosocial contexts in which children develop.

Healthy Start Children's Clinic
507 South College Street
Fort Collins, CO 80524
(303) 484-2600

MCHIP
MCJ-088801
10/01/89-09/30/94
Project Director:
Thomas J. Wera, M.D.

The Healthy Start Children's Clinic is a comprehensive, community-based program which seeks to provide access to high quality pediatric care for area children from indigent families. A major goal of the project is to increase participation by the medical community in providing care to low-income children. Prior to the clinic's opening, only 4 physicians in an area with 120,000 people would accept new Medicaid clients. Since it began, the clinic has enlisted the support of over 75 community physician volunteers, including 6 pediatricians and 20 family physicians.

Reducing the Nation's Pediatric Intensive Care Mortality
Children's Hospital National Medical Center
Department of Critical Care
111 Michigan Avenue, N.W.
Washington, DC 20010
(202) 745-2131

Research
MCJ-110584
04/01/89-03/31/93
Project Director:
Murray M. Pollack, M.D.

Recent data indicate that the quality of pediatric intensive care is not uniform, resulting in the unnecessary deaths of numerous infants and children each year. This proposal will investigate four primary, intensive care characteristics using an objective, quantitative methodology that can be applied to future studies. This methodology, validated in a national study, indicates that there is a precise relationship between severity of illness (physiologic instability as assessed by the Pediatric Risk of Mortality [PRISM] score) and intensive care outcome (i.e, survival or death) in university pediatric ICUs with intensivist directors. We hypothesize that the precise relationship between severity of illness and outcome will not hold consistently in all pediatric ICUs, resulting in underestimation of mortality.

Improvement of Children's Health Care in Pediatric Practice
American Academy of Pediatrics
141 Northwest Point Boulevard
P.O. Box 927
Elk Grove Village, IL 60009-0927
(312) 981-7633

MCHIP
MCJ-173400
10/01/87-09/30/90
Project Director:
Gretchen V. Fleming, Ph.D.

The ultimate goal of this project is to improve children's health care in primary practice through information feedback from project activities, which will enable physicians to alter their practices when indicated. A national network of primary care pediatricians who cooperate in studies of their own choice to enhance the knowledge base on important child health issues will be developed and maintained. Study results will be disseminated to network members so that they may use this information to improve their delivery of care.

Healthy Families and Young Children
Kansas Department of Health and Environment
Landon State Office Building
900 Southwest Jackson
Topeka, KS 66620-0007
(913) 296-1303

MCHIP
MCJ-203817
10-01-88-9-30-91
Project Director:
Linda Kenney

This project will use the home visitor concept as a method of improving the health of young children. Trained lay visitors, supervised by registered nurses, will provide in-home family support services and link families with available community resources. Baseline data on immunization compliance levels, accidental deaths, and child abuse and neglect will be compared with quarterly statistics over the 3-year grant cycle to determine whether health status improvement objectives are met.

Family Care Center Health Project
Lexington-Fayette Urban County Government
200 East Main Street
Lexington, KY 40507
(606) 258-3800

MCHIP
MCJ-218402
10/01/89-09/30/94
Project Director:
Barbara Curry

The Lexington-Fayette Urban County Government has established the Family Care Center to provide comprehensive psychological, health, social, day care, and educational services to unemployed or low-income, at-risk families. Through a variety of programs, including a preschool enrichment program and a parent education/vocational training program, the project will seek to meet three primary objectives: (1) Provide accessible and affordable health screening, preventive health care injury prevention, and primary health care services; (2) provide early identification of potentially handicapping conditions and treatment and monitoring of chronic health problems; and (3) empower parents to increase their participatory role in their child's health care.

Outcome Evaluation of a Pediatric Health Care Model
Medical and Health Research Association of
New York City, Inc.
40 Worth Street, Room 720
New York, NY 10013
(212) 285-0220

Research
MCJ-360539
01/01/87-12/31/90
Project Director:
Jack Elinson, Ph.D.

The objective of this study is to test a model of pediatric health care delivery, the Pediatric Resource Center (PRC), designed to reach low-income, high-risk children. The study is focused on the model as implemented at seven clinic sites in New York City. The PRC model provides comprehensive care in a team setting, maintaining continuity and linkages to a network of health and social services. The hypothesis under examination is that children, after receiving PRC services for a specified period of time, have better health outcomes than do children in a comparison group, and that mothers of PRC children have more knowledge and better attitudes with respect to health care.

Simultaneous Screening for Hearing, Speech, and Language
Duke University Medical Center
Child Development Unit
Department of Pediatrics
Durham, NC 27706
(919) 684-5513

Research
MCJ-370574
01/01/88–12/31/90
Project Director:
Raymond A. Sturner, M.D.

The goals of this study are to: (1) Develop a means of screening for speech, language, and hearing problems in a child health setting, utilizing no more time than is ordinarily committed to hearing screening alone; and (2) improve the current hearing screening procedures in order to be more sensitive to a wider range of audiologic impairments than is possible by current, routine pure tone screening procedures.

Preventing Baby Bottle Tooth Decay in WIC Supplement Food Program and MCH Project Populations
Ohio Department of Health
Division of Dental Health
246 High Street
P.O. Box 118
Columbus, OH 43266-0118
(614) 466-4180

MCHIP
MCJ-393208
10/01/87–09/30/90
Project Director:
James F. Quilty, Jr., M.D.

In order to reduce baby bottle tooth decay (BBTD) among children served by WIC and MCH programs in Ohio, this project plans activities which will establish the baseline prevalence of BBTD, identify children at risk, and increase the percentage of caregivers who are aware of BBTD prevention methods. Activities include the development of education modules and onsite training of WIC and MCH staff.

Improved Compliance with Well-Child Care: *El Niño Sano* Project
La Clinicia del Carino Family Health Care Center, Inc.
2690 May Street
P.O. Box 800
Hood River, OR 97031
(503) 386-6380

MCHIP
MCJ-413816
10/01/88–9/30/91
Project Director:
Colin S. Wood

This project seeks to address the disproportionately high incidence of preventable and treatable diseases and conditions among the migrant and seasonal farmworker (MSFW) child population by proving to MSFW parents that well-child care and related preventive services are necessary. The main component of the program involves conducting 100 well-child care field clinics in area farm labor camps over a 3-year period.

Healthy Children Project
Western Pennsylvania Caring Foundation, Inc.
Fifth Avenue Place, Suite 3012
Pittsburgh, PA 15222
(412) 255-8033

MCHIP
MCJ-423535
10/01/87-9/30/90
Project Director:
Dolores S. Wilden

This project seeks to demonstrate the effectiveness of an innovative financing mechanism and a tested health education program in improving the health status of the target population. Children from 220 families have been provided with Blue Cross/Blue Shield primary health care benefits. In addition, parents of one-half of the study population will be offered health education classes. Baseline data on health status and health care utilization patterns obtained from parent interviews will be compared with similar data collected 1 year after the child's enrollment.

Comprehensive Approach to Promoting Child and Family Health in Rural Black Communities: Church, Home, and School
South Carolina Department of Health and Environmental Control
2600 Bull Street
Columbia, SC 29201
(803) 734-4650

MCHIP
MCJ-453712
10/01/88-09/30/91
Project Director:
Joanne G. Fraser, Ed.D.

The goal of this project is to improve the health status of black children and youth in three rural South Carolina counties. Specifically, the project will work to: (1) Increase the percentage of children, youth, parents, and teachers practicing healthy behaviors; (2) increase parent-child communication about health concerns; and (3) increase the percentage of school-age children and youth with an identified "medical home." The project uses a combination of proven interventions, including health education and promotion projects based at the worksite, school, and church.

Amelioration of Health Problems of Children with Parents with Mental Retardation
Wisconsin Council on Developmental Disabilities
1 West Wilson Street
Madison, WI 53707
(608) 266-7826

MCHIP
MCJ-553500
10/01/87-09/30/90
Project Director:
Jayn Wittenmyer

This project attempts to improve the health status of children in families in which one or both parents have mental retardation by reducing the risks associated with lack of immunization, poor nutrition, undiagnosed medical or developmental problems, injuries, and inadequate early stimulation. Efforts will include both direct services (such as immunization, screening, and home care programs) and a consultation and technical assistance program aimed at improving the accessibility of the service delivery system for these children.

Child Health

Health and Safety in Child Care Settings

Alabama Day Care Health and Safety Program
Alabama Department of Public Health
Bureau of Family Health Services
434 Monroe Street
Montgomery, AL 36130-1701
(205) 261-5661

MCHIP
MCJ-016023
10/01/89-09/30/92
Project Director:
Lloyd M. Hofer, M.D.

The goal of this demonstration project is to develop and implement a comprehensive health and safety curriculum in child day care settings to improve the health status of children. A comprehensive educational program will be developed and presented in the day care setting with a positive parenting component, a children's component, and a day care worker component. This educational curriculum will demonstrate positive changes in child health indicators, day care environment, and safety, and increased knowledge of child development, health, and safety issues on the part of parents and day care workers.

California Child Health in Day Care
San Diego State University
5300 Campanile Drive
San Diego, CA 92182
(415) 594-4668

MCHIP
MCJ-063710
10/1/88-9/30/91
Project Director:
Betty Z. Bassoff, D.S.W.

This project seeks to demonstrate an improved data reporting system. Project objectives include: Collecting baseline data not currently available on the incidence and prevalence of selected infectious diseases and injuries in day care settings; implementing a system for organizing the training of child care providers in preventive health practices at the local level; developing a way to provide ongoing consultation and updated information to trainers and providers; and producing a reduction in the incidence and prevalence of infectious diseases and injuries as a result of widespread provider training.

Development of National Health and Safety Standards in Out-of-Home Child Care Programs
American Public Health Association
1015 15th Street, N.W.
Washington, DC 20005
(202) 789-5627

MCHIP
MCJ-113001
07/1/87-06/30/90
Project Director:
Debra Hawks Peabody, M.P.H.

This project seeks to develop a comprehensive set of performance standards for health, safety, nutrition, and sanitation in out-of-home care. The project will conduct a national survey of existing State regulations related to child day care and will identify exemplary child care programs worthy of replication. The proposed performance standards will be widely distributed for critical review by child care providers, consumers, health professionals, and additional technical reviewers.

Health Promotion in a Group Child Care Setting
Georgia State University
Department of Parent/Child Nursing
School of Nursing
University Plaza
Atlanta, GA 30303
(404) 651-3059

MCHIP
MCJ-133711
10/1/88-09/30/91
Project Director:
Sherry K. Gaines, Ph.D., R.N.

The focus of this project is the provision of comprehensive health care services to a culturally diverse group of children enrolled in a child development center housed on an urban university campus. A nursing clinic will be established in the child development center. Project objectives include increasing the number of women who breastfeed; promoting dental health; decreasing the transmission of infectious diseases; decreasing the number of injuries; increasing the child care providers' awareness of cultural issues; and detecting developmental, nutritional, hearing, and vision deficiencies, as well as inappropriate parenting.

Reducing Children's Exposure in Family Day Care Settings to Environmental Smoke
Massachusetts Health Research Institute, Inc.
101 Tremont Street, Suite 600
Boston, MA 02108
(617) 727-0732

MCHIP
MCJ-256024
10/01/89-09/30/92
Project Director:
Gregory Connolly, D.M.D.

The overarching goal of this demonstration project is to improve the health of infants and children by reducing their exposure to environmental tobacco smoke (ETS) in family day care settings. Through education of family day care providers, child health will be improved in two ways: (1) Reduction of ETS during child care hours, and (2) provider role modeling of healthful habits for children and parents.

Child Care Health Promotion Project
New Mexico Health and Environment Department
Public Health Division
1190 Saint Francis Drive
Santa Fe, NM 87503
(505) 827-2469

MCHIP
MCJ-356021
10/09/89-09/30/92
Project Director:
Jeanne Colegrove, R.D.

The Child Care Health Promotion Project will address the health needs of New Mexico's child care population through the implementation of health promotion programs in child care settings. The goal of this project is to improve the health status of children ages 1–5 in McKinley and Rio Arriba Counties by empowering child care providers to make appropriate health behavior changes and to conduct quality health promotion programs, projects, and services in their child care settings.

Reduction in Transmission of Infectious Disease in Child Care Settings
University of North Carolina at Chapel Hill
Department of Maternal and Child Health
Rosenau Hall, CB #7400
Chapel Hill, NC 27599
(919) 966-5981

MCHIP
MCJ-373111
10/01/87-09/30/90
Project Director:
Jonathan B. Kotch, M.D., M.P.H.

The goal of this project is to reduce the amount of respiratory illness and diarrheal disease transmission in day care homes and centers. The project will: (1) Implement both classroom and onsite training methodologies to improve hygienic practices, health and safety policies, and behaviors in both day care centers (DCCs) and family day care homes (FDCHs); and (2) collect data to demonstrate improved environmental sanitation and child health status in DCCs and FDCHs participating in the training project.

Family Day Care Home Health and Safety Project
Ohio Department of Health
Division of Maternal and Child Health
246 North High Street
P.O. Box 118
Columbus, OH 43266-0118
(614) 466-8932

MCHIP
MCJ-396022
10/01/89-09/30/92
Project Director:
Ruth Shrock, M.S., R.D., L.D.

This project addresses three specific health-related concerns: (1) The lack of a formal system to identify and address health issues in home day care by State agencies; (2) the lack of communication among health agencies and home day care providers at the community level; and (3) inadequate health and safety training of home day care providers. The project is designed to strengthen existing systems among health agencies, child care regulators, and providers and create new health promotion networks for children cared for in day care homes.

Otitis Media in Day Care: Effects on Language/Attention
Pennsylvania State University
Department of Individual and Family Studies
S-110 Henderson Human Development Building
University Park, PA 16802
(814) 865-1447

Research
MCJ 420565
03/01/88-02/28/90
Project Director:
Lynne Feagans, Ph.D.

This 5-year study is designed to determine whether there is a causal relationship between otitis media observed in a day care setting and developmental delays in language and attention. Otitis media is the second most frequent reason parents take their children to a physician. Although antibiotic regimens have helped to reduce the acute phase of the disease, there is no really effective therapy for the fluid that often remains in the middle ear after the acute phase is over. This fluid is associated with a mild to moderate hearing loss.

Pennsylvania Chapter of the American Academy of Pediatrics Early Childhood Health Promotion Project
Pennsylvania Chapter of the American Academy of Pediatrics
121 Coulter Avenue
Ardmore, PA 19003
(215) 649-9117

MCHIP
MCJ-426025
10/01/89-09/30/92
Project Director:
Susan S. Aronson, M.D.

The goal of this project is to improve the health status of children in early childhood programs in Pennsylvania. To reach this goal, the Early Childhood Education Health Promotion Project will: (1) Establish a statewide registry of health consultants to serve early childhood education programs; (2) provide training for staff in each participating program; (3) focus technical assistance efforts on problems identified by a data-based assessment of health problems; and (4) provide access to project consultants, staff, and resources for staff of participating programs. A sample of 400 children in the treatment group and 400 in the control group will be tracked by outcome objectives. The difference between these two groups, as shown in pre- and post-test data, will be used to measure program effectiveness.

Milwaukee Infant/Toddler Day Care Health Service Centers
Wisconsin Department of Health and Social Services
Bureau of Community Health and Prevention
Division of Health
1 West Wilson
P.O. Box 309
Madison, WI 53701-0309
(608) 267-9069

MCHIP
MCJ-553420
10/01/87-09/30/90
Project Director:
Susan Bulgrin, R.N., M.S., C.P.N.P.

The goal of this project is to improve the health and safety of the children of adolescent parents in alternative care settings. Direct health care services will be provided and will include health screenings and assessment, illness management and followup, identification and evaluation of special needs children, health education, day care provider staff development, and parent education.

Child Health

Emergency Medical Services

Alaska EMS for Children
Alaska Department of Health and Social Services
EMS Section
Division of Public Health
P.O. Box H-06C
Juneau, AK 99811-0600
(907) 465-3027

EMSC
MCH-024001
10/01/89-09/30/91
Project Director:
Mark S. Johnson, M.P.A.

This project will address the problem of pediatric emergencies in Alaska through interventions at various stages in the process of disease and injury that affects children and the system that is designed to combat the results of this process. The overall goal of the project is to improve the emergency medical care system and its ability to treat and rehabilitate Alaska's critically ill and injured children. The project will attempt to address deficiencies in the EMS system at all levels, including prehospital, hospital, and rehabilitative services.

Demonstration Project: EMS for Children
University of Arkansas for Medical Sciences
Arkansas Children's Hospital
800 Marshall Street
Little Rock, AR 72202
(501) 370-1845

EMSC
MCH-054001
10/01/87-09/30/90
Project Director:
Debra H. Fiser, M.D.

This project seeks to improve the standards of and increase the levels of knowledge about emergency medical services for children (EMSC). Activities include a travelling 3-day seminar for EMSC and other hospital and critical care personnel; a statewide public education project on cardiopulmonary resuscitation; the development of EMSC standards; and research on the effectiveness of other EMSC projects in promoting adoption of effective methods for improving EMSC.

Emergency Medical Services for Children—Focus on the Neurologically Impaired Child
George Washington University
Children's Hospital National Medical Center
Trauma Center
111 Michigan Avenue, N.W.
Washington, DC 20010
(202) 939-4927

EMSC
MCH-114001
10/01/87-09/30/90
Project Director:
Jane Ball, R.N., Dr.P.H.

This project focuses on children who have neurological impairments which resulted from traumatic injuries or critical illnesses. The project developed a needs assessment of the tri-State area (the District of Columbia, Maryland, and Virginia) and conducted longitudinal assessments of 584 minority, neurologically impaired children ages birth to 14 years. Other activities include preventive education for lay people and EMSC education for nurses, physicians, and other health professionals.

Emergency Medical Services Grant for Children
University of Florida College of Medicine
University Hospital of Jacksonville
655 West Eighth Street
Jacksonville, FL 32209
(904) 350-6874

EMSC
MCH-124001
10/01/87-09/30/89
Project Director:
Joseph J. Tepas, M.D.

This project evaluates emergency medical services for children by coordinating the clinical, research, and educational efforts of three major components of pediatric emergency care: Pediatric critical care medicine, pediatric emergency medicine, and pediatric trauma care. A comprehensive combined data base with information on all aspects of pediatric emergency care will be developed, and an assessment of physiologic and anatomic indices of measurement during prehospital, hospital, and postdischarge phases of care will be produced.

Emergency Medical Services for Children
Hawaii Department of Health
Emergency Medical Services Systems Branch
3627 Kilauea Avenue, Room 102
Honolulu, HI 96816
(808) 735-5267

EMSC
MCH-154001
10/01/87-09/30/90
Project Directors:
Donna Maiava
Calvin Sia, M.D.

The goal of this project is to reduce the consequences of critical illness and injury in the pediatric population. The project will develop the following: (1) A quality assurance system for a vertically integrated EMSC program; (2) a competency-based curriculum for training nurses in pediatric emergency care; (3) skills, drugs, and equipment standards; (4) epidemiological studies of critical illness and injury in Hawaii; (5) a system for identification of special needs of children with handicapping conditions; (6) a rehabilitation plan for the State; (7) an education and training program for all levels of pediatric emergency care; (8) a preschool injury prevention program; and (9) a curriculum for an emergency medical system for Micronesia.

Idaho Statewide EMSC Project
Idaho Department of Health and Welfare
Health Division
EMS Bureau
450 West State Street
Boise, ID 83720
(208) 344-5994

EMSC
MCH-164001
10/01/89-09/30/91
Project Director:
Paul Anderson

The Idaho Statewide EMSC Project will strive to reduce mortality and morbidity due to childhood illness and injury by: (1) Developing regional EMSC councils to address EMSC issues in order to implement EMSC subsystems; (2) conducting educational programs for providers and public prevention/education campaigns; (3) developing innovative approaches to improve the knowledge and skills of rural area providers; and (4) conducting EMSC studies in a rural environment.

Emergency Services for Children for Louisiana
Tulane University School of Medicine
Children's Hospital of New Orleans
200 Henry Clay Avenue
New Orleans, LA 70118
(504) 899-9511, ext. 239

EMSC
MCH-224001
10/01/89-09/30/91
Project Director:
William D. Hardin, M.D.

The long-term goal of the Louisiana EMSC project is to reduce the morbidity and mortality resulting from pediatric emergencies by developing a statewide system for emergency pediatric care. This project will incorporate features of previous EMSC grant recipients while offering new initiatives to expand upon previous efforts. Particular attention will be focused on the emergency medical care needs of handicapped children and those who require chronic ventilatory assistance.

Emergency Medical Services for Children
Maine Emergency Medical Services
Medical Care Development, Inc.
11 Parkwood Drive
Augusta, ME 04330
(207) 622-7566

EMSC
MCH-234001
10/1/87-09/30/90
Project Director:
Charles Danielson, M.D.

This project develops and evaluates a rural EMSC demonstration program and provides assistance to other rural States in adopting the successful aspects of the program. The focus of the project is the development of a modular training program on the care of pediatric emergencies which can be presented in appropriate segments to all levels of prehospital and emergency room personnel.

Organization for Comprehensive Emergency Medical Services for Children in Maryland
University of Maryland at Baltimore
Maryland Institute for EMS Systems
22 South Greene Street
Baltimore, MD 21201
(301) 328-3931

EMSC
MCH-244001
10/01/87-09/30/90
Project Director:
Pat Moloney Harmon, R.N, M.S.

This project expands a system of emergency medical services for children with life-threatening illnesses and injuries in Maryland. Activities include conducting studies of the epidemiology and demographics of trauma and critical illness; developing standards for patient triage; and refining an advanced pediatric life support course.

EMS for Children: Improvement of the Pediatric Component of a Rural EMS System
Vermont Department of Health
EMS Division
131 Main Street
P.O. Box 70
Burlington, VT 05402
(802) 863-7310

EMSC
MCH-504001
10/01/89-09/30/91
Project Director:
W. Daniel Manz

This project will enhance the pediatric care capabilities of Vermont's EMS system as an integral part of the State's long-term EMS developmental program. Problems identified in Vermont which will be addressed by the EMSC project include injuries associated with motor vehicle crashes, head injuries, and the ability of the EMS system to respond to the emergency needs of handicapped children and their families. These problems have been identified by internal and external advisory committees to the Vermont Department of Health. There is virtually no identifiable minority population in the State, and accordingly the special emergency requirements of handicapped children have been selected as an additional focus.

Emergency Medical Services for Children
Washington Department of Social and Health Services
Washington Pediatric Project
1914 North 34th Street, Suite 405
Seattle, WA 98103
(206) 632-0066

EMSC
MCH-534001
10/01/87-09/30/90
Project Director:
Dena Brownstein, M.D.

This project seeks to decrease morbidity and mortality in pediatric emergencies by increasing the knowledge of EMS personnel and by reducing cultural and economic barriers to emergency care. Activities include developing algorithms and guidelines, creating a course for emergency room physicians, compiling a data base which focuses on outcomes and interventions, and conducting a survey on utilization of emergency medical services by Native Americans, migrant workers, and Southeast Asian refugees.

Improving Emergency Services for Children in Wisconsin
Wisconsin Department of Health and Social Services
Division of Health, Emergency Medical Services Section
1 West Wilson Street
P.O. Box 309
Madison, WI 53701
(608) 266-0470

EMSC
MCH-554001
10/01/87-09/30/90
Project Director:
Michael R. French

This project seeks to improve the EMS system for children, particularly rural and Native American children. Activities include collection and analysis of data on the incidence, types, causes, treatments, and outcomes of pediatric emergencies; education and training for parents and over 600 EMS personnel; development and publication of assessment, transfer, triage, and treatment protocols; evaluation and comparison of modes of transport; and a needs assessment of medical control communications.

Child Health

Lead Poisoning Prevention

Lead Poisoning Training Project
Kentucky Department for Health Services
Division of Maternal and Child Health
Cabinet for Human Resources
275 East Main Street
Frankfort, KY 40621
(502) 564-4830

Genetics
MCJ-211003
10/01/82-09/30/90
Project Director:
Patricia K. Nicol, M.D., M.P.H.

This project operates and maintains a resource and training center which provides a knowledge base for State MCH professionals who develop and manage lead poisoning prevention programs. Activities include providing information services and technical assistance; providing site experience in door-to-door screening and environmental and nursing initial home visits; conducting workshops and conferences; publishing the Lead Lines newsletter; and cataloging available lead poisoning prevention resource materials.

Nationwide Blood Lead and Erythrocyte Protoporphyrin Proficiency Testing Program
Wisconsin State Laboratory of Hygiene
465 Henry Mall
Madison, WI 53706
(608) 262-1146

Genetics
MCJ-551003
10/01/88-09/30/93
Project Directors:
Patricia H. Field, Ph.D.
Noel Stanton

The goal of this project is to improve the detection and treatment of children with lead poisoning by providing a free monthly proficiency testing program for blood lead and erythrocyte protoporphyrin (EP) to any interested laboratory. Objectives include providing lead and EP specimens, distributing survey results, serving as an information source, improving laboratory performance, and investigating possible hematofluorometer calibrators.

Child Health

Violence/Injury Prevention

Child Injury Prevention Project
Alaska Department of Health and Social Services
Division of Public Health
P.O. Box H-06C
Juneau, AK 99811
(907) 274-7626

MCHIP
MCJ-023844
10/01/87-09/30/90
Project Director:
Rita A. Schmidt, M.P.H.

The goal of this project is to improve the capacity of State public health programs to address the problem of childhood injuries through parent education. This will be accomplished through the establishment of child injury prevention programs as part of routine well-child clinics. Program components include a parent survey, parent interviews conducted by public health nurses, and safety information and education provided in clinic waiting rooms.

Arizona Child/Adolescent Injury Prevention Initiative
Arizona Department of Health Services
Office of Maternal and Child Health
1740 West Adams
Phoenix, AZ 85007
(602) 542-1880

MCHIP
MCJ-043888
10/01/87-09/30/90
Project Director:
Doris Evans-Gates, B.S.W., M.S.

The goal of this project is to reduce accidental injuries and injury-related deaths among children and adolescents in Arizona. Project objectives are to provide professional training, develop an injury prevention clearinghouse, facilitate injury prevention programs in local communities, establish a mechanism for injury prevention program coordination, develop a State injury database plan, and facilitate peer-based adolescent injury prevention programs and all-terrain vehicle training programs.

Regionalization of Care for Abused Children
Indiana University
Research and Sponsored Programs
620 Union Drive
Indianapolis, IN 46202-5167
(317) 274-8271

MCHIP
MCJ-183901
10/01/88-09/30/91
Project Director:
Roberta A. Hibbard, M.D.

The goal of this project is to regionalize care for child abuse victims. The program will increase the number of children referred for evaluations by expanding the network of professionals who communicate and coordinate services for child abuse victims. Children will receive thorough medical evaluation and treatment by knowledgeable health care providers working together with social, legal, and mental health professionals.

Injury Prevention for School-Age Children and Youth
Kansas Department of Health and Environment
Bureau of Chronic Disease and Health Promotion
Landon State Office Building
900 Southwest Jackson Street, 10th Floor
Topeka, KS 66612-1290
(913) 296-1205 or 296-1237

MCHIP
MCJ-203889
10/01/87-09/30/90
Project Directors:
Virginia Tucker, M.D.
Joyce Markendorf, R.N., M.N.

The goal of this project is to reduce the incidence of athletic injuries among children and youth, grades 7 to 12, who participate in competitive sports. Objectives are to collect sports-related injury morbidity data and document sports-related morbidity rates, and to promote preparticipation physical examinations through the education of nurses, coaches, and primary care physicians.

HHS Region III Childhood Injury Prevention Project
Johns Hopkins University
School of Hygiene and Public Health
Department of Maternal and Child Health
624 North Broadway
Baltimore, MD 21205
(301) 955-3753

MCHIP
MCJ-243306
10/01/88-09/30/91
Project Director:
Louise M. Wulff, R.N., M.S., Sc.D.

This project will assist the Title V directors in the Region III States and the District of Columbia to: (1) Assemble available injury-related data in order to estimate the geodemographic incidence of childhood injuries and the prevalence of injury-related disability for planning purposes; (2) foster the design and targeting of State- and community-based prevention initiatives; and (3) initiate and support coalition-building activities leading to ongoing State and local participation in childhood injury prevention activities.

Injury Prevention Implementation Incentive Grant: New England Network
Education Development Center, Inc.
53 Chapel Street
Newton, MA 02160
(617) 969-7100

MCHIP
MCJ-253841
10/01/87-09/30/90
Project Director:
Patricia J. Molloy, M.S.W.

This project is an adjunct to the New England Network to Prevent Childhood Injuries. The goal of the project is to implement the activities of the network's task force. Specifically, this project seeks to: (1) Educate relevant health department personnel about injuries so they can support injury prevention as a priority for the State health department; (2) raise awareness about injuries among members of the media and key decision-makers; (3) develop mechanisms for in-State sharing of injury data and for the regular dissemination of these and regional data; and (4) foster capacity building within each State, especially the formation of coalitions and identification of complementary funding sources.

Minnesota Childhood Injury Prevention Project
Minnesota Department of Health
717 Southeast Delaware Street
Minneapolis, MN 55440
(612) 623-5166

MCHIP
MCJ-273111
10/01/87-09/30/90
Project Director:
Carolyn McKay, M.D.

This project plans to expand childhood injury surveillance efforts and childhood injury prevention activities within local community health services. Project activities include compiling data on childhood-specific injury morbidity and mortality, creating a coalition of agencies with an interest in childhood injuries, providing assistance in developing local prevention programs, developing a comprehensive approach to reduce scald injuries in children ages birth to 5 years, and making long-range plans to address other types of injuries and other age groups.

Parent Outreach Project
Wilder Foundation
919 Lafond Avenue
St. Paul, MN 55104
(612) 642-2015

MCHIP
MCJ-273020
10/01/87-09/30/90
Project Director:
Eugene S. Urbain, Ph.D.

This project seeks to develop and demonstrate a replicable, collaborative, interagency prevention intervention model utilizing existing professional casework services, community education, and community-based social support for a population at risk for potential child maltreatment. Important components of the project include home visits by nurses and volunteers. Public health nurses will conduct assessments in the home and monitor the developmental progress of the child, while a volunteer "parent befriender" will offer support to help build the parent's self-esteem and strengthen parent-child relationships.

Burn Injury Prevention Program for Low-Income Families
New York State Department of Health
Injury Control Program
Corning Tower, Room 621
Albany, NY 12237
(518) 473-1143

MCHIP
MCJ-363002
10/01/87-09/30/90
Project Director:
Jeff Simon, M.S.

Through the installation of home safety devices and the enforcement of building and fire codes, this project aims to reduce the incidence of morbidity and mortality from burn and scald injuries in selected rural and low-income areas of New York State. A secondary goal is to develop a comprehensive community health education burn prevention and safety demonstration program for low-income populations.

Training EMTs in Primary Prevention of Childhood Injuries
New York State Department of Health
Empire State Plaza
Corning Tower, Room 621
Albany, NY 12237
(518) 473-1143

MCHIP
MCJ-363126
10/10/87-09/30/90
Project Director:
Leslie Fisher, M.P.H.

This project's goal is the reduction of morbidity and mortality from childhood home injuries caused by fires, scalds, falls, and poisonings. Project objectives are to develop a training module in the primary prevention of childhood injuries for emergency medical technicians (EMTs) to use in their communities, and to conduct a demonstration project in a target area by mobilizing the community resources of EMTs.

Oklahoma Pediatric Injury Control Project
Oklahoma State Department of Health
Maternal and Child Health Service
P.O. Box 53551
Oklahoma City, OK 73152
(405) 271-4471

MCHIP
MCJ-403235
10/01/87-09/30/90
Project Director:
Naomi R. Jackson, M.S., Dr.P.H.

This project's efforts to reduce morbidity and mortality resulting from childhood injuries focus on motor vehicle accidents, fires, and drownings. Child safety restraints are promoted through the expansion of infant and toddler car seat loan programs and through parent, professional, and public education. The project provides public education on drownings, burns, and other childhood injuries, and will pursue the need for regulation and increased enforcement. In coordination with a Centers for Disease Control grant, statewide surveillance systems will be established.

South Carolina Childhood Injury Reduction Project
South Carolina Department of Health and
Environmental Control
Division of Children's Health
2600 Bull Street
Columbia, SC 29201
(803) 737-4050

MCHIP
MCJ-453307
10/01/88-09/30/91
Project Director:
Mimi Jackson, R.N., M.S.

The goal of this project is to reduce fatal and nonfatal injuries sustained by children in South Carolina by assuming leadership in bringing together the necessary data and agencies to focus on the childhood injury problem. The lack of a coordinated, centralized system to quantify childhood morbidity and the lack of public and professional awareness of the injury problem will be addressed by the development of an automated surveillance system, and by the establishment of a coalition which will provide input into the development of the surveillance system, disseminate information about childhood injury, and make recommendations on how to reduce the childhood injury problem.

Reduction of Childhood Accidental Injuries in Utah Students

Utah Department of Health
Family Health Services Division
288 North 1460 West
P.O. Box 16650
Salt Lake City, UT 84116-0650
(801) 538-6161

MCHIP
MCJ-493244
10/01/87-09/30/90
Project Director:
Peter van Dyck, M.D., M.P.H.

The goal of this project is to demonstrate a reduction in the frequency as well as the severity of school-related playground injuries among children in 20 target elementary schools. This will be achieved by making environmental modifications to the playgrounds and educating faculty and students in these schools. The PTA and other community groups will be involved, and school playgrounds will be inspected on a semiannual basis.

Child Pedestrian Injury Prevention

Harborview Injury Prevention and Research Center
325 Ninth Avenue ZX-10
Seattle, WA 98104
(206) 223-8388

MCHIP
MCJ-533500
10/01/87-09/30/90
Project Director:
Frederick P. Rivara, M.D., M.P.H.

In order to reduce morbidity and mortality from childhood pedestrian injuries, this project will use four interventions: School-based education programs; a mass media educational campaign; enhanced police enforcement of speed and pedestrian right-of-way laws; and modification of environmental risk factors in targeted areas. The latter will include improved sidewalks, altered crosswalk markings, and the fencing of high-risk areas.

Children with Special Health Needs

Early Childhood Intervention

Statewide Linkage and Tracking Network of Early Identification and Early Intervention for 0–3 At-Risk and Disabled Infants
District of Columbia Commission of Public Health
1660 L Street, N.W.
Washington, DC 20036
(202) 727-3866

MCHIP
MCJ-113908
10/01/86–09/30/90
Project Director:
E. Elaine Vowels, Ph.D.

The goal of this project is to develop an information management system for early identification and intervention in order to improve the health outcome of infants and children birth to 3 years of age who have disabilities or are at risk for developing disabilities. Activities include establishing a centralized data bank and an integrated network service delivery system, as well as implementing a tracking system of the service delivery process.

Facilitation of Primary Care Physician Participation in Preventive Health Care
Hawaii Family Stress Center
2919 Kapiolani Boulevard, Suite 30
Honolulu, HI 96826
(808) 732-0000

MCHIP
MCJ-153887
10/01/86–09/30/90
Project Director:
Gail Breakey, R.N., M.P.H.

This project aims to reduce the incidence of poor health characteristics among low-income, culturally diverse populations by promoting the involvement of primary care physicians (pediatricians) in early screening and intervention. Project goals include increasing the level of preventive health care for underserved children, reducing the severity of psychosocial problems, increasing physicians' sense of involvement as part of a team in providing services to project children and their families, and demonstrating a practical process for accomplishing these goals which can be replicated across the Nation.

Project AIMS
University of Southern Maine
Human Services Development Institute
96 Falmouth Street
Portland, ME 04102
(207) 780-4430

MCHIP
MCU-233926
10/01/86–09/30/91
Project Director:
Susan Partridge, M.S.W., Ph.D.

Project AIMS works to strengthen the capacity of Maine's service system (including P.L. 99-457 efforts) to meet the emotional health needs of young children (birth to 5 years old) and their families. The project objectives are to: (1) Establish a multidisciplinary network of project associates; (2) develop and field-test an emotional health brief assessment tool for children birth to 5 years old; (3) recommend to the service network methods of conducting comprehensive psychosocial assessments of children/families with emotional difficulties; (4) strengthen treatment services which facilitate attachment, interaction, mastery, and support within families; and (5) disseminate products and methods statewide and nationally.

Maternal and Child Health Cooperative Agreement
Regional Center for Infants and Young Children
11710 Hunters Lane
Rockville, MD 20852
(301) 984-4444

MCHIP
MCU-243927
10/01/86-09/30/91
Project Director:
Linda Gerson, Ph.D.

The goal of this project is to develop and implement comprehensive and family-centered approaches to early identification, assessment, and treatment of infants and young children who are at risk for or suffering from emotional and/or regulatory difficulties. To this end, the Regional Center for Infants and Young Children plans to: (1) Monitor types of families and children referred to and receiving services from an agency specializing in the early detection of emotional disorders or potential risk; (2) develop principles and technology to identify infants and young children/families at risk for psychosocial and developmental difficulties; (3) develop comprehensive, family-centered approaches to assessment and diagnosis; (4) develop prevention-oriented, family-centered approaches to intervention; (5) develop and disseminate technical assistance and training approaches; (6) engage State and local maternal and child health (MCH) agencies in the project; and (7) access multiple financial resources to support its efforts.

Early Intervention Collaborative Study: Preschool Phase
University of Massachusetts Medical School
Department of Pediatrics
55 Lake Avenue North
Worcester, MA 01655
(508) 856-3028

Research
MCJ-250583
04/01/89-12/31/92
Project Director:
Jack P. Shonkoff, M.D.

This 4-year study is a continuation (Phase II) of a nonexperimental longitudinal investigation of the development of 217 children with disabilities and their families after their transition from early intervention programs to preschool settings. The long-term objectives of this study are to examine the stability of effects of early intervention services (utilizing comprehensive data collected during Phase I) and to identify the predictors of subsequent child competence and family adaptation during the preschool period.

Nutrition Surveillance, Intervention, and Training in the Early Intervention Population
Massachusetts Department of Public Health
and the Shriver Center
150 Tremont Street, Fourth Floor
Boston, MA 02111
(617) 727-5822 or 642-0226

MCHIP
MCJ-255035
10/01/88-09/30/91
Project Directors:
Cynthia Taft Bayerl, R.D., M.S.
Jacque Ries, R.D., M.P.H.

The goals of this project are to: (1) Collaborate with early intervention (EI) programs in the New England region to establish an ongoing nutrition service system that provides screening and assessment; (2) establish a central reporting system to determine the nutritional status of the nutritionally at-risk population; and (3) establish a system of screening, referral, and assessment to identify children in the EI program who are at nutritional risk. A permanent training program and resource manual will be incorporated into the orientation program for all EI providers and professionals.

Improving Memory of EMR Children
Wayne State University
Psychology Department
71 West Warren
Detroit, MI 48202
(313) 577-5244

Research
MCJ-260554
07/01/87–10/31/89
Project Director:
Hilary Horn Ratner, Ph.D.

This study's objective is to develop, for educable mentally retarded (EMR) children, instructional strategies that are embedded in a social context and will enhance children's memory performance across time and situation. Specifically, the project tests the use of a 12-week training program in which the subject children's memory skills will be exercised and developed through the use of demand conditions and self-generated memory strategies. With the accomplishment of this objective, it is hoped that EMR children will reach a more nearly normal level of functioning in society.

Early Identification of Hearing-Impaired Children
Utah State University
UMC 6580
Logan, UT 84322
(801) 750-2003

MCHIP
MCJ-495037
06/01/89–05/31/92
Project Director:
Karl R. White, M.D.

Using the materials and expertise gained over the last 10 years in operating a birth certificate-based screening program for hearing impaired children in Utah, this project will implement and evaluate the cost-efficiency of such programs in two additional States (Oregon and Iowa). The objective of the project is that over the 36-month period of the project, participating States will increase by 50 percent the number of hearing-impaired children identified by 12 months of age.

Promoting Success in Zero to Three Services
National Center for Clinical Infant Programs
2000 14th Street, North
Suite 380
Arlington, VA 22201
(703) 528-4300

MCHIP
MCJ-115041
07/01/89–06/30/94
Project Director:
Carol Berman, M.A.

The goal of this project is to improve systems of services for infants and toddlers with special health care needs and their families. The project will function as a national resource center on the needs of this special population. Over the 3-year funding period, the program will pursue two main objectives. The first is to identify and promote nationally examples of workable approaches to serving infants and toddlers with special health needs and their families. The second is to identify and promote community systems that use prevention approaches successfully so that they can be replicated nationwide.

Children with Special Health Needs

Family-Centered, Community-Based, Comprehensive Services

Alabama's Care Management Project
Alabama State Department of Education
Division of Rehabilitation and
Crippled Children's Services
2129 East South Boulevard
Montgomery, AL 36111
(205) 792-0022

MCHIP
MCJ-015030
10/01/88–09/30/91
Project Directors:
Glenna Graverson
Chris Beaird

This project trains parents of older handicapped children to facilitate case management services to parents of special needs children by serving as "partners" to those parents and children eligible for services under P.L. 99-457. The "parent partners" (family care managers) will provide support to parents of young children with problems, serve as their advocates in helping them assume their role as primary caretakers for their children, and work closely with CSHN staff in determining the needs of the family and in assuring the family's understanding and cooperation with recommendations and with the individual family service plan.

Nutrition Care for the Child with Special Health Care Needs
University of Alabama at Birmingham
Sparks Center for Development and Learning Disorders
P.O. Box 313
University Station
Birmingham, AL 35294
(205) 934-0803

Training
MCJ-009116
09/01/88–06/30/93
Project Director:
Harriet H. Cloud, M.S., R.D.

Nutrition for the Child with Special Health Care Needs is an intensive, 1-week course for multidisciplinary team members concerned the nutritional needs of this population. It is taught at two different sites,with an overall goal of improving nutrition awareness and services for the child with special health care needs.

Family-Centered, Community-Based Project
Arkansas Children's Medical Services
P.O. Box 1437, Slot 526
Little Rock, AR 72203
(501) 682-2277

MCHIP
MCJ-055018
10/01/87–09/30/90
Project Director:
Sandra J. Mathes

This project addresses the need to establish a regionalized system of community-based service centers to assist the families of children with special health care needs in coordinating and obtaining access to needed services. Strategies include instituting a multidisciplinary team to ensure coordination and service delivery through support of case planning, case management, referrals, and education of the client population and general public; and developing linkages between community service providers and the centrally located, more fully developed resources in Little Rock.

ACMS/Community-Based Care Coordination Project for CCS Children and Their Families in Los Angeles County
California Children Services of Los Angeles County
2064 Marengo Street
Los Angeles, CA 90033
(213) 226-2405

MCHIP
MCJ-065020
10/01/87–09/30/90
Project Director:
Dale C. Garell, M.D.

The goals of this project are to: (1) Develop and implement an automated case management system in Los Angeles County to improve and enhance the existing California Children's Services (CCS) system; (2) establish a CCS community-based care coordinator program within Los Angeles County to coordinate and implement an individual service plan for children with special needs and their families; and (3) test the feasibility and desirability of these goals in Los Angeles County, California, and other States.

Automated Information and Data System for Improving Case Management Services for Children with Special Health Care Needs
San Diego-Imperial Counties
Developmental Services, Inc.
4355 Ruffin Road, Suite 206
San Diego, CA 92123-1648
(619) 576-2932

MCHIP
MCJ-065017
10/01/87–09/30/90
Project Director:
Raymond M. Peterson, M.D.

This project aims to improve case management services by: (1) Developing a computerized system for using the Individual Program Plan/Individual Family Service Plan for intake and periodic assessments; (2) developing and disseminating a computerized directory of resources for children with special health needs; (3) expanding the network of community agencies serving these children; and (4) planning for interagency collaboration to obtain information regarding the costs and effectiveness of services for children with special health care needs. The automated system will serve to assure the integration of client evaluation with treatment planning and to coordinate services to effectively serve children with special health care needs and their families.

Graduate Training in Pediatric Occupational Therapy
Colorado State University
College of Applied Human Sciences
Gibbons Building, Room 104
Fort Collins, CO 80523
(303) 491-7567

Training
MCJ-009105
10/01/87–06/30/92
Project Director:
Elnora Gilfoyle, D.Sc.

The overall mission of this project is to develop a model curriculum that is sensitive to differing family, social, and cultural issues, interprofessional in approach, and adaptable to the needs of a variety of home and community settings. The design of the training program includes interagency collaborative relationships as an efficient means of providing effective training programs for occupational therapists and families of children with handicaps.

Handicapped Children's Resource Center
Commonwealth of the Northern Mariana Islands
Department of Public Health and Environmental Services
Commonwealth Health Center
P.O. Box 409
Saipan, MP 96950
(670) 234-8950

MCHIP
MCJ-695006
07/01/87–06/30/90
Project Director:
Jose T. Villagomez, M.D.

The goal of this project is to reduce the barriers to obtaining health and educational services for children with special health care needs by providing a community-based, family-oriented system of comprehensive and coordinated services. Strategies include increasing community awareness of services; establishing interagency collaboration; and developing a centralized data collection system related to health status, service, and educational needs.

Project CONNECT
University of Connecticut Health Center
Department of Pediatrics
Division of Child and Family Studies
270 Farmington Avenue, The Exchange
Farmington, CT 06032
(203) 674-1485

MCHIP
MCJ-095048
10/01/89–09/30/92
Project Director:
Mary Beth Bruder, Ph.D.

Project CONNECT will develop a model for a service delivery system of family-centered, community-based care for children with complex health needs and their families. The project will implement a demonstration model with approximately 24 families during the first year. This project will also develop and implement a training curriculum for families and service providers at both the hospital and community level. The curriculum content will include general principles of family-centered care, accessing services, case coordination/case management, funding and reimbursement, system level change/advocacy, and implementation of the standards developed by New England SERVE.

National Network for Children with Special Needs
Georgetown University Child Development Center
3800 Reservoir Road, N.W.
Bles Building, Room CG-52
Washington, DC 20007
(202) 687-8635

MCHIP
MCU-115042
07/01/89–06/30/94
Project Director:
Phyllis R. Magrab, Ph.D.

The goal of this project is to achieve comprehensive, coordinated, community-based services for children with special health care needs and their families through collaboration among public and private agencies and parents at all levels within the service delivery system. In order to reach this goal, the program will (1) develop a national network; (2) facilitate the development of national, regional, State, and community coalitions; (3) develop resources for States and communities; (4) provide technical assistance; (5) promote collaborative interagency planning at the Federal level; and (6) improve outreach to those individuals, agencies, and institutions needed to implement family-centered, community-based, coordinated care.

MCHIP Systems Development Project for Children with Special Health Care Needs
Federated States of Micronesia
Department of Human Resources
P.O. Box 490
Kolonia, Pohnpei, FM 96941
(691) 320-2619

MCHIP
MCJ-645029
10/01/88–09/30/91
Project Director:
Micki Pryer, M.D.

The goals of this project are to: (1) Identify and analyze the handicapping conditions present in the Federated States of Micronesia; (2) introduce concepts of coordinated care services, family- and community-based networks, and case management services to the providers who care for children with special health care needs; (3) provide training for the development of communications systems and linkage networks among the agencies involved with caring for these children; and (4) consider mechanisms for the development of systems to enable the ongoing identification, monitoring, and treatment of children with special health care needs.

Parent-Pediatric Partnership
Zero-to-Three Hawaii Project
3627 Kilauea Avenue, Suite 106
Honolulu, HI 97816
(808) 735-0434

MCHIP
MCJ-158902
10/01/89–09/30/94
Project Director:
Jean L. Stewart, M.A., M.P.H.

This project aims to develop a model for providing comprehensive, coordinated, family-centered, multidisciplinary care for environmentally at-risk infants and toddlers in low-income, culturally diverse settings. Each participating family will be assigned to a medical home with a pediatrician. The families then will be tracked through one of two demonstration sites (one urban and the other rural). A care coordinator will be assigned to each site and will be responsible for facilitating development of an individualized medical and educational support plan for each family.

CHSC Parent Partnership
University of Iowa
Department of Pediatrics
Child Health Specialty Clinics
Iowa City, IA 52242
(319) 356-1118

MCHIP
MCJ-195025
10/01/88–09/30/91
Project Director:
Richard P. Nelson, M.D.

This project seeks to strengthen family-centered care for Iowa children with special health care needs by expanding parent participation in CHSC services development, by creating a statewide parent consultant network, and by enhancing community opportunities for parents to meet with one another and with professionals in a family-oriented experience. Program plans include an annual statewide issues forum; a regional parent consultant network composed of 2 parents from each of the 13 CHSC service regions; and family enrichment weekends designed to bring together parents and children for discussion, reflection, and recreation.

National Resource Center for Community-Based Systems of Service for Children with Special Health Care Needs and Their Families
University of Iowa
National Maternal and Child Health Resource Center
Boyd Law Building
Melrose and Byington
Iowa City, IA 52242
(319) 335-9067

MCHIP
MCJ-195040
07/01/89-06/30/94
Project Directors:
Josephine Gittler, J.D.
John C. MacQueen, M.D.

The goals of this project are to generate support for developing community-based service systems for children with special health care needs and their families, and to increase the capabilities of individuals and groups to engage in such systems development. To reach these goals, the project will establish an information clearinghouse initiative, an educational and training initiative, and a technical assistance initiative. These initiatives will address a broad range of needs encountered in developing community-based systems, such as interagency collaboration, case management automated information and referral systems, and linkages among health care providers.

Improving Community-Based Systems of Care by Preparing MCH-CSHN Nurses for Their Role in Implementing P.L. 99-457
University of Kentucky College of Nursing
760 Rose Street
Lexington, KY 40536-0232
(606) 233-6687

MCHIP
MCJ-215052
10/01/89-09/30/92
Project Director:
Gwen Lee, R.N., Ed.D.

The goal of this project is to enhance the capability of the health care delivery system in DHHS Regions IV, V, and VI to provide community-based systems of care for infants and toddlers by preparing community-based nurses and State nurse leaders working in MCH and CSHN programs for their roles in implementing P.L. 99-457, Part H. The primary objective of this project is to enhance the competence of community-based nurses by developing a regionally focused, nationally relevant curriculum.

Project Copernicus: Model for Family-Centered Case Management for Children with Special Health Care Needs
Maryland Department of Health and Mental Hygiene
201 West Preston Street
Baltimore, MD 21201
(301) 225-5580

MCHIP
MCJ-245028
10/01/88-09/30/91
Project Director:
Judson Force, M.D.

The concept of family-centered care has emerged from the recognition that service delivery systems need to be more responsive to the choices made by families with children with special health care needs. As the philosophy of family-centered care is embraced by parents and professionals, we face the challenge of applying these concepts to actual practice. The aim of Project Copernicus is to assist parents and professionals to develop and use family-centered care coordination activities. The project will develop, demonstrate, and evaluate training programs in family-centered care coordination, with target groups of professionals and families in urban, rural, and suburban areas of Maryland and Virginia.

National Center for Family-Centered Care
Association for the Care of Children's Health
7910 Woodmont Avenue, Suite 300
Bethesda, MD 20814
(301) 654-6549

MCHIP
MCJ-115039
07/01/89–06/30/94
Project Director:
Beverley H. Johnson

The goals of the National Center for Family-Centered Care are to promote implementation of a family-centered approach to care for children with special health care needs; to foster parent-professional collaboration at all levels of health care; and to document the effectiveness of a family-centered approach to care for children with special health care needs.

CAPP National Resource Parent Center
Federation for Children with Special Needs
312 Stuart Street, Second Floor
Boston, MA 02116
(617) 482-2915

MCHIP
MCJ-255038
07/01/89–06/30/94
Project Director:
Betsy Anderson

This project is designed to help parents acquire the skills and knowledge necessary to enable them to assume a greater role in caring for their children and to participate collaboratively with health professionals in program and policy formation. The project has framed three major goals: (1) To strengthen parent leadership capabilities through a system of technical assistance; (2) to expand the Collaboration Among Parents and Health Professionals (CAPP) regional system to coordinate with parent organizations, professional groups, and State health departments; and (3) to develop effective parent-professional liaisons at all levels of health care.

Coordinated Care and Case Management for Children with Special Health Needs
Massachusetts General Hospital
Department of Children's Services
Fruit Street
Boston, MA 02114
(617) 726-1885

Research
MCJ-250581
01/01/88–12/31/90
Project Director:
James M. Perrin, M.D.

This project investigates the effectiveness of coordinated, community-based case management services for children through a survey of families with a range of chronic conditions in States with and without case management services. The study's hypotheses are that children and families who receive case management services (as compared to those controls who do not) will show: (1) Greater utilization of nonmedical and nonhospital services; (2) improved functional status as indicated by increased participation in age-appropriate community activities; and (3) improved psychological status.

New England SERVE: A Planning Network for Implementing Family-Centered, Community-Based Care
Massachusetts Health Research Institute, Inc.
101 Tremont Street, Room 615
Boston, MA 02108
(617) 574-9493

MCHIP
MCJ-255043
10/01/89–06/30/94
Project Directors:
Susan G. Epstein, M.S.W.
Ann B. Taylor, Ed.D.

This project seeks to address three specific needs which must be met in order to facilitate successful implementation of the Surgeon General's National Agenda for Children with Special Health Needs. They are: (1) The need to build a broad base of support for family-centered, community-based care; (2) the need to implement standards of quality care in both public and private programs for children with special health needs; and (3) the need to increase access to health care financing, care coordination, and community-based services.

LINC: Local Individualized Networks of Care
Michigan State University
Department of Pediatrics and Human Development
B-240 Life Sciences
East Lansing, MI 48824
(517) 353-2398

MCHIP
MCJ-265009
07/01/87–06/30/90
Project Director:
Barbara W. Desguin, M.D.

The goals of this project are to develop a comprehensive local support service network which will provide case-managed care to families with children with special health needs, and to facilitate the development of financial reimbursement plans which will assist communities in providing comprehensive, family-based support services. Four community agencies will participate in the multiprofessional network, contributing mental health, nutrition, education, health education, and social services.

Project Linkages
Park Nicollet Medical Foundation
5000 West 39th Street
Minneapolis, MN 55416
(612) 924-2805

MCHIP
MCJ-275050
10/01/89–09/30/92
Project Director:
Georgianna Larson, R.N., M.P.H.

The goal of Project Linkages is to improve the quality of life and health, both physical and psychosocial, of children with asthma and their families through the development of community-based, family-centered programs effectively mobilizing local, regional, and State resources from public, private, and voluntary agencies. Project objectives are to: (1) Increase child/family/primary provider understanding of disease management through a community-based clinic team approach; (2) increase child/family/primary care provider expertise in disease management through formal and informal education; and (3) facilitate third-party payer reimbursement for health promotion, community-based services for children with asthma and epilepsy.

SPRANS/MCHIP Exchange
Park Nicollet Medical Foundation
5000 West 39th Street
Minneapolis, MN 55416
(612) 927-3393

MCHIP
MCJ-275044
10/01/89–06/30/94
Project Director:
William F. Henry, M.A.

The purpose of this project is to provide a national resource center for SPRANS/MCHIP grantees. The SPRANS Exchange will assist States in developing and expanding family-centered, community-based systems of care through SPRANS/MCHIP project clearinghouse activities. These will include technical assistance on product development and distribution, networking and information sharing, annual national workshops, and a resource library. The SPRANS Exchange will focus on three levels of assistance to grantees, designed to decrease fragmentation and to improve the quality and accessibility of SPRANS achievements. These levels are: (1) SPRANS/MCHIP networking, (2) SPRANS product development, and (3) SPRANS/OMCH promotion.

Developing Community-Based Care/Case Management Services
Mississippi State Department of Health
P.O. Box 1700
Jackson, MS 39215-1700
(601) 960-7614

MCHIP
MCJ-285021
10/01/87–09/30/90
Project Director:
Sam Valentine

This project seeks to develop a statewide system of community-based, comprehensive care/case management and family support services. Program strategies include developing a training curriculum for the skilled delivery of home-based family support services by medical professionals, paraprofessionals, and parents; piloting a respite providers' network; providing statewide training on the provision of family support services; and developing and disseminating a statewide directory of trained family support service providers.

Montana Project for Children with Special Health Care Needs
Montana Department of Health and
Environmental Sciences
Cogswell Building, Room C314
Helena, MT 59620
(406) 444-4740

MCHIP
MCJ-305015
10/01/87–09/30/90
Project Director:
Sidney C. Pratt, M.D.

The overall goal of this project is to develop a replicable system of family-centered, community-based case management for children with special health care needs in a frontier State. Targeted communities must be under 20,000 in population and serving areas at least 50 miles from a Level II facility. The project objectives are to: (1) Upgrade case management and assessment skills of local public health nurses; (2) develop family-centered, community-based case management programs that address the needs of the family and the child with special needs; and (3) develop community-based teams that empower families to actively participate in identifying and meeting educational, social, psychological, health, and financial needs for themselves and the child with special needs.

Case Management for Parents of Indian Children with Special Health Care Needs
Southwest Communication Resources, Inc.
P.O. Box 788
Bernalillo, NM 87004
(505) 867-3396

MCHIP
MCJ-355014
10/01/87–09/30/90
Project Director:
Randi Suzanne Malach

This project provides a model program for American Indian families and the professionals who serve them. The program goals are to identify cultural, systemic, institutional, and policy barriers that inhibit Native American family participation in the "Western" health care/case management system; improve case management by facilitating effective communication between Native American families and the non-Native American health care professionals who serve them; and increase Native American family participation in health care policy development and planning forums in order to promote changes that improve services for Native American children and families. Activities include developing a videotape illustrating effective cross-cultural communication strategies for non-Indian health care providers and training an Indian parent advocate to help families seen at IHS special pediatric clinics.

Families and Communities in Transition
SKIP of New York, Inc.
500 East 83rd Street, Suite 1B
New York, NY 10028
(212) 734-0728

MCHIP
MCJ-365004
07/01/87–06/30/90
Project Director:
Kathy Schwaninger

The purpose of this project is to encourage and expand home care as an option for families of children with special health needs. Objectives include empowering families who choose home care with the necessary skills and knowledge to become their own effective case managers; creating a collaborative system between parents and professionals in planning and caring for children; and improving and expanding both current home health and other community service provisions for children and their families.

Demonstration Project to Develop a Pediatric Service Coordination Model
MetroHealth Medical Center
Department of Pediatrics
3395 Scranton Road, Quad 3041
Cleveland, OH 44109
(216) 459-3635

MCHIP
MCJ-395026
10/01/88–09/30/91
Project Director:
Lyn Cooper Gill

The goal of this project is to enable families to provide home-centered care for their special needs children, when home is the best option, by establishing a service delivery system. This system will: (1) Promote the availability and accessibility of comprehensive quality services that address physical, psychosocial, spiritual, and developmental needs; (2) encourage continuity and coordination of care among all components of the child and family's interdisciplinary team; (3) promote communication among caregivers; and (4) be reimbursable, accountable, and responsive to changing needs.

Northwest REAP Project
Oregon Health Sciences University
Child Development and Rehabilitation Center
3181 Southwest Sam Jackson Park Road
Portland, OR 97201
(573) 279-8093

MCHIP
MCJ-415053
10/01/89–09/30/92
Project Director:
J. Albert Browder, M.D.

The Northwest REAP (Realizing Environmental Access Potential) Project will plan, develop, and implement a family- and community-based program to provide technological equipment to Oregon and southwest Washington children and youths with disabilities. The project will focus on the provision of three interdependent components: (1) Interdisciplinary assessment teams; (2) a loan-lease program; and (3) an urban/rural outreach and followup system to assure effective utilization of the assistive devices prescribed. Family advocacy, community resource linkages, interagency agreements and services plans, and undergraduate and postgraduate professional training in the family-oriented use of technology will be project priorities.

Family-Centered, Community-Based Services for Children with Cancer
Children's Hospital of Philadelphia
34th and Civic Center Boulevard
Philadelphia, PA 19104
(215) 590-2249

MCHIP
MCJ-425027
10/01/88–09/30/91
Project Director:
Beverly J. Lange, M.D.

Traditionally, treatment of pediatric cancer has required high-technology, provider-intense care, which is expensive and disrupts family life and the child's socialization and education. The goal of this project is to design alternative means of treatment by: (1) Moving the delivery of some high-technology care for children with cancer from a Level III hospital to the community and home; (2) providing community-based intervention for those children at risk for learning disabilities caused by cancer or its treatment; and (3) developing a community-based system of followup services for long-term survivors.

Care Management Model for Genetic Services
University of Tennessee Medical Center
Developmental and Genetics Center
1924 Alcoa Highway
Knoxville, TN 37920
(615) 544-9031

MCHIP
MCJ-475005
07/01/87–06/30/90
Project Director:
Carmen B. Lozzio, M.D.

This project seeks to reduce the discontinuity and fragmentation of health care delivery for children with genetic disorders in east Tennessee, to empower the parent/guardian of a child with a genetic disorder to become an effective manager of the child's special health care needs, and to determine the applicability of the MacQueen Child Profile Reporting Form as a data collection tool for genetics programs. Strategies include an active outreach program and the provision of case management services.

Coordinated Care Program for Children with Special Health Care Needs
Kelsey-Seybold Foundation for
Medical Research and Education
700 Fannin, Suite 1860
Houston, TX 77030
(713) 791-8784

MCHIP
MCJ-485001
07/01/87–06/30/90
Project Director:
Earl J. Brewer, Jr., M.D.

The goal of this project is to more fully meet the specialized medical, physical, and psychosocial needs of children with chronic illnesses in order to improve their functional abilities and their families' coping skills. The case management component of the project includes working with HMO health team models in Houston and at the Kaiser Permanente Southern California Medical Group as well as working with the State of Texas Coalition for Children with Unmet Health Needs and the Texas Department of Health to further develop case management centers. The project's national awareness program includes the development of plans to interest State Departments of Health and Kids on the Block groups in case management and family networking as a means of increasing awareness.

Improving Community-Based Services for Special Needs Children and Their Families in Rural Utah
Utah Department of Health
Family Health Services Division
P.O. Box 16650, 20 DFHS
Salt Lake City, UT 84116-0650
(801) 538-6161

MCHIP
MCJ-495049
10/01/89–09/30/92
Project Director:
Peter C. van Dyck, M.D., M.P.H.

The goal of this project is to improve the functioning of special needs children and their families by providing adequate services in a rural area of the State. Outcome objectives are to: (1) Involve parents of special needs children in developing a service plan for their child; (2) improve the implementation of service plans for rural special needs children; (3) improve coordination of services to rural special needs children by local and tertiary care providers; and (4) improve the adequacy of services provided to special needs children by local and tertiary care providers.

National and Local Models of Paraprofessional Training and Service
Utah State University
Early Intervention Research Institute
Logan, UT 84322-6580
(801) 750-3346

MCHIP
MCJ-495051
10/01/89–09/30/92
Project Director:
Richard Roberts, Ph.D.

This project will develop a paraprofessional cadre of home visitors working under the supervision of public health nurses serving rural children with developmental delays. Fifty families will receive paraprofessional weekly home visiting services under this program. The program is designed to increase developmental outcomes of children and increase the social and agency support provided to rural families. A national network of home visitor programs will be established leading to sets of recommendations to the Federal Interagency Coordinating Council regarding best practices for the use of paraprofessional home visiting services.

Program of Family-Directed Case Management
Vermont Department of Health
Handicapped Children's Services
1193 North Avenue
P.O. Box 70
Burlington, VT 05402
(802) 863-7338

MCHIP
MCJ-505016
10/01/87–09/30/90
Project Director:
Carol R. Hassler, M.D.

The goal of this project is to increase the family-centeredness of care for children with special health needs by empowering families with the knowledge and skills they need to become case managers for their children. Program strategies include: (1) Restructuring service delivery models within Handicapped Children's Services; (2) training staff in the process of family-centered case management by parents; (3) fortifying interagency coalitions; (4) developing a philosophy statement for Vermont children with special health needs that reflects a commitment to support families and community-based care; and (5) defining and implementing the case management process.

Diagnostic and Followup Project for Native American Children in Wisconsin with Special Health Care Needs
University of Wisconsin at Madison
Statewide Genetics Services Network
104 Genetics Building
445 Henry Mall
Madison, WI 53706
(608) 263-6355

MCHIP
MCJ-555024
10/01/88–09/30/91
Project Director:
Raymond Kessel, Ph.D.

This project is part of an ongoing effort to identify and address issues related to developmental disabilities among Native American children in Wisconsin to assure that proper diagnostic and followup services are provided to this population. Tribes, State and local agencies, and volunteer organizations are involved in a collaborative effort to design and establish a long-term, community-based, high quality program in each tribal community in Wisconsin to serve the special health care needs of Native American children. The two main goals of the project are to: (1) Become an integral part of the tribal service systems, and (2) improve those systems in such a way that they address both the needs of developmentally disabled children and the issues related to the prevention of disabilities.

Children with Special Health Needs

Chronic Illness, Disabling Conditions

Center for Developmental and Learning Disorders Training
University of Alabama at Birmingham
P.O. Box 313
UAB Station
Birmingham, AL 35294
(205) 934-0803

Training
MCJ-000910
07/01/85–06/30/90
Project Director:
Charles Alford, M.D.

This project prepares professionals to provide health and health-related care from an interdisciplinary perspective to children with multiple handicaps and mental retardation. Training is directed toward long-term graduate and postgraduate students with career interests in maternal and child health, and is comprised of orientations, workshops, conferences, seminars, courses, and continuing education programs at both preservice and inservice levels. The center serves the five-State region of Alabama, Florida, Georgia, Mississippi, and Tennessee.

Medical Genetics in Prevention of Mental Retardation and Birth Defects
University of Alabama at Birmingham
UAB Station
Birmingham, AL 35294
(205) 934-4983

Training
MCJ-000905
07/01/82–06/30/93
Project Director:
Sara C. Finley, M.D.

This project, utilizing the resources of a comprehensive medical genetics program, provides training for future leaders in the field of medical genetics. The program is based in a tertiary medical center, and graduate students and postdoctoral fellows receive didactic and laboratory instruction in cytogenetics, clinical genetics, biochemical genetics, and molecular genetics. The goals of this program include providing a cadre of leaders who possess state-of-the-art knowledge and who can implement, direct, and interpret genetic diagnostic laboratory procedures. The program will strive to reach maternal and child health populations by providing instruction in the professional schools at UAB and continuing education programs for primary care providers throughout the State.

Pediatric Pulmonary Training Center
University of Alabama at Birmingham
Children's Hospital
1600 Seventh Avenue South
Birmingham, AL 35233
(205) 934-9845

Training
MCJ-000987
10/01/85–06/30/90
Project Director:
Raymond Lyrene, M.D.

This project conducts clinical training at the graduate level for nurses, social workers, and nutritionists in an active clinical setting. At the postgraduate level, pediatric pulmonary fellowships are conducted. Undergraduate courses are provided as a part of the training program for respiratory therapists. These are superimposed on a background of services rendered to patients from a wide geographic area who are afflicted with all varieties of pediatric pulmonary disease, both acute and chronic.

Biochemical Genetics Laboratory
University of California at San Diego
Department of Pediatrics, M-009-A
La Jolla, CA 92037-0609
(619) 534-4150

Training
MCJ-004007
07/01/88–06/30/93
Project Director:
William Nyhan, M.D., Ph.D.

This project is a demonstration laboratory devoted to the diagnosis and management of patients with inborn errors of metabolism, and serves as a referral center for patients and for samples from patients. It serves broadly in the training of health professionals in the use of state-of-the-art methods.

Comprehensive Training of Pediatric Dental Residents
University of Southern California
School of Dentistry, Pediatric Dentistry
University Park MC 0641, Room 304A
Los Angeles, CA 90089-0641
(213) 743-7265

Training
MCJ-009098
07/01/87–06/30/92
Project Director:
Ronald Johnson, D.D.S.

This training program involves a three-year structured curriculum that provides the basic scientific information, as well as an intensive clinical experience, necessary to prepare the student to deliver exemplary care for children, adolescents, and individuals who are developmentally disabled, medically compromised, or handicapped. In addition, the curriculum stresses the role of research in promoting knowledge and improving the level of dental care to the patient. A thesis based on original clinical or laboratory research is part of the requirements toward graduation from the program. A strong emphasis is placed on recognizing and meeting the dental needs of the community and on interaction with medical and nonmedical disciplines to optimize the level of care delivery for patients.

Interdisciplinary Training in Chronic Disabilities, UCLA
Neuropsychiatric Institute
760 Westwood Plaza
Los Angeles, CA 90024
(213) 825-0395

Training
MCJ-000927
07/01/89–06/30/94
Project Director:
James Q. Simmons III, M.D.

The UCLA UAP Interdisciplinary Training Program provides interdisciplinary training for 30 core leadership trainees each year at the graduate and postdoctoral level in 10 different disciplines. Its focus is on children and families with chronic disabilities, with a special emphasis on psychosocial adaptation. Leadership trainees participate in a core didactic curriculum in chronic disabilities, an interdisciplinary clinical team, their own discipline seminars, and a schedule of community observations. UAP faculty operate or coordinate seven interdisciplinary clinical services for trainees, including three on the UCLA medical campus and four in the community.

Medical Genetics: Diagnosis and Management
University of California at San Francisco
Department of Pediatrics
Division of Medical Genetics, Box 0106
San Francisco, CA 94143
(415) 476-2981

Training
MCJ-000445
07/01/84–06/30/93
Project Director:
Charles Epstein, M.D.

This project provides service and training in medical genetics, with particular emphasis on comprehensive genetic counseling, the diagnosis and the management of human abnormalities of genetic origin, and the development and implementation of state-of-the-art approaches to genetic diagnosis and treatment. The project has been established because of the need to make training available in many aspects of medical genetics and to develop a system for making high quality genetic services available to a broad consumer community.

Nursing Leadership in Pediatric Primary Chronic Care
University of California at San Francisco
Department of Family Health Care Nursing
San Francisco, CA 94143-0606
(415) 476-4698

Training
MCJ-000935
07/01/82–06/30/93
Project Director:
Patricia Jackson

The pediatric nursing faculty of the University of California is in the process of further developing a specialty track, entitled "Clinical Nurse Specialist in Pediatric Primary Chronic Care," which will: (1) Implement a nursing curriculum focused on health maintenance, health promotion, and disease prevention in children and adolescents, with a component on handicapping conditions, chronic illnesses, and developmental disabilities; (2).prepare students with skills in case management; (3) incorporate theoretical, clinical, and leadership components from Title V and other MCH health programs; and (4) prepare students for effective participation in interdisciplinary approaches to the planning and delivery of health care services for children and families.

Survey of Chronically Ill Children's Use of Time Out of School
University of California at San Francisco
Family Health Care Nursing
San Francisco, CA 94143
(415) 476-4663

Research
MCJ-060550
04/01/87–03/31/90
Project Director:
Bonnie Holaday, R.N., D.N.S.

The primary aim of this study is to describe and analyze the everyday out-of-school life experiences of chronically ill school-age children, and to examine the effects of different ecological contexts on the child's out-of-school life. Based on the analysis of data from a pilot study, two general hypotheses have been developed: (1) The patterns of chronically ill children's time use depend on the extent to and the manner in which parents and others engage in joint activities with them; and (2) the capacity of the parents to engage in such joint behavior depends on the extent to which there exist external support systems that provide opportunity, assistance, resources, and channels of communication.

University Affiliated Training: Multihandicapped Children
Children's Hospital of Los Angeles
4650 Sunset Boulevard
Los Angeles, CA 90027
(213) 669-2151

Training
MCJ-000914
07/01/89-06/30/94
Project Director:
Warren E. Cohen, M.D.

This program provides graduate-level training for professionals who seek advanced training in caring for children and families affected by developmental disability and chronic illness. The training program strongly emphasizes prevention, detection, early intervention, and provision of exemplary and culturally appropriate care delivery. In addition to graduate-level training, the program is engaged in the development and dissemination of related teaching and instructive materials, as well as the provision of consultative services and technical assistance to community and government agencies involved in the care of children and families affected by handicapping conditions.

Nutrition Project for Children with Special Needs
Colorado Department of Health
Family and Community Health Services
4210 East 11th Avenue
Denver, CO 80220
(303) 331-8359

MCHIP
MCJ-085034
10/01/88-09/30/91
Project Director:
Daniel J. Gossert, A.C.S.W., M.P.H.

An estimated 73 percent of the children in the Colorado Handicapped Children's Program have nutritional problems which may interfere with optimal growth and development and may increase the debilitating effects of their handicap or chronic illness. Prior to the implementation of the Nutrition Project for Children with Special Needs, there was no systematic way to find and offer nutrition intervention to children in the Colorado Handicapped Children's Program. The goal of the Nutrition Project for Children with Special Needs is to develop a replicable nutrition intervention system to reduce or prevent the debilitating effects of poor nutrition in children with handicapping conditions and chronic illness.

Regional Biomedical Diagnostic and Treatment Program
University of Colorado Health Sciences Center
4200 East Ninth Avenue
Denver, CO 80262
(303) 270-7301

Training
MCJ-000252
07/01/84-06/30/93
Project Director:
Stephen Goodman, M.D.

This project is the regional biochemical diagnostic and treatment program for children with inherited metabolic diseases in Colorado and the surrounding Western States. The program is now in its 18th year of providing the specialized laboratory evaluation and clinical management required for children with inborn errors of metabolism in the Rocky Mountains and High Plains Region.

Interdisciplinary Graduate Training in Developmental Disabilities
Georgetown University
37th and O Streets, N.W.
Washington, DC 20007
(202) 687-8635

Training
MCJ-000925
07/01/89–06/30/94
Project Director:
Nina Scribanu, M.D.

The mission of the Georgetown University Child Development Center (GUCDC), a University Affiliated Program, is to improve the quality of life for children with mental retardation, multiple handicaps, and other special health care needs and their families and to reduce the incidence of these conditions in our society. GUCDC provides interdisciplinary training of health-related professionals and prepares them for leadership in a variety of clinical, training, and consultative roles in delivering, planning, or implementing family-centered, community-based, coordinated care. Trainees participate in a core curriculum, in case management seminars, as members of GUCDC interdisciplinary teams, in community agency clinical services, and in teaching and clinical research activities.

Training in Communication Disorders
Howard University
School of Communications
2400 Sixth Street, N.W.
Washington, DC 20059
(202) 636-7690

Training
MCJ-002011
07/01/84–06/30/92
Project Director:
Orlando L. Taylor, Ph.D.

The purpose of this project is to provide preprofessional leadership training in communication disorders to students. This program has two major focuses, which emphasize interdisciplinary training as well as coursework, with an emphasis on issues of cultural and linguistic diversity and communication disorders. Students design an individualized program of study consisting of departmental core courses; departmental seminars in either neurological communication disorders, child language, or linguistics; and two related electives in such areas as medicine, dentistry, health care administration, and psychology. In addition, students receiving fellowships are assigned to 15 hours per week of apprenticeship activities.

Transgenerational Project for Children with Learning Disabilities, Their Parents, and Schools
Howard University Child Development Center
525 Bryant Street, N.W.
Washington, DC 20059
(202) 636-6973

MCHIP
MCJ-113853
07/01/86–06/30/90
Project Director:
Merceline Dahl-Regis, M.D.

This project aims to improve the academic functioning of low-income, developmentally disabled, preadolescent youth. It provides interdisciplinary evaluations of learning disabled children, assures appropriate school recommendations for them, and trains and counsels their parents. Other activities include continuing education workshops for health professionals regarding developmental and other learning disabilities.

Pediatric Pulmonary Center
University of Florida
J. Hillis Miller Health Center
Box J-296
Gainesville, FL 32610
(904) 392-4458

Training
MCJ-002013
07/01/85-06/30/90
Project Director:
Arlene A. Stecenko, M.D.

The purpose of this project is to provide exemplary health care for a segment of the large and increasing number of children with chronic and acute respiratory disease and to provide interdisciplinary training to alleviate the shortage of health professionals required to meet the needs of this patient population. Educational programs include interdisciplinary inpatient and outpatient management experiences, didactic curriculums, and a variety of other activities tailored to the students interests and goals. Center faculty provide services in the form of consultative clinics and continuing education programs. Both faculty and students are active in research, patient and community education, and development of tools for patient management.

University Affiliated Interdisciplinary Training Facility
Mailman Center for Child Development
University of Miami School of Medicine
P.O. Box 016820
Miami, FL 33101
(305) 547-6635

Training
MCJ-000903
07/01/89-06/30/94
Project Director:
Robert S. Stempfel, M.D.

The Mailman Center for Child Development is a University Affiliated Program. The primary purpose of the program is to increase the quality and number of professionals in the field of maternal and child health and to prepare them to accept leadership roles in the community. The Mailman Center is a teaching, research, and service institute dedicated to the prevention of handicapping conditions, the prevention of secondary consequences of existing handicaps, and the provision of family-centered, community-integrated services for persons with handicapping conditions and other special health care needs.

Physical Therapy in Maternal and Child Health Training
Emory University
1441 Clifton Road, N.E.
Atlanta, GA 30322
(404) 727-5564

Training
MCJ-000989
10/01/79-06/30/92
Project Director:
Pamela Catlin, Ed.D.

The purpose of this project is to train professionally qualified physical therapists in maternal and child health care. The program emphasis is on implementation of a master of medical science program in physical therapy that stresses clinical management through prevention, early detection, and intervention in maternal and child health problems, as well as preparation of physical therapy leaders and educators with expertise in maternal and child health care.

Leadership Training for Pacific Island Nurses
University of Guam
Division of Human Ecology
UOG Station
Mangilao, GU 96923
(671) 734-3300, ext. 322

Training
MCJ-009100
07/01/87–06/30/91
Project Director:
Anne Rohweder, M.N.

The intent of this project is to extend the education of a significant number of Pacific Island nurses beyond the associate degree or diploma in nursing by enrolling them in a second step B.S.N. program, with special provisions for maternal and child health projects to be carried out on home islands. The specific purpose of the extended education is to develop or expand leadership skills in the area of maternal and child health.

Educational Behavioral Program for PKU
University of Illinois at Chicago
College of Allied Health Professions
840 South Wood Street
Chicago, IL 60612
(312) 996-8055

Research
MCJ-170575
01/01/88–12/31/90
Project Director:
Kimberlee Michals, R.D., Ph.D.

This study examines the effects of an experimental program which uses both an educational and a behavioral approach to accomplish dietary self-management by child and adolescent phenylketonuria (PKU) patients.

Training for the Care of the Handicapped Child
Indiana University
Riley Child Development Center
702 Barnhill Drive
Indianapolis, IN 46202-5225
(317) 274-8167

Training
MCJ-009131
07/01/89–06/30/94
Project Director:
John D. Rau, M.D.

The Riley Child Development Center has a 20-year tradition of interdisciplinary training, diagnosis, treatment, development of case management services, support of community resources, and research to enhance services for children with chronic handicapping conditions. The fundamental elements of program planning for children with special needs and for the education/training of health and related professionals must effectively relate (1) client/family needs; (2) manpower prepared to respond to those needs; and (3) access of clients to such professionals so as to match needs and providers. The Riley Child Development Center seeks to relate these elements in a conceptual fashion useful both for individual clients and for populations of children with similar special needs, e.g., mental retardation and other long-term disabilities.

Cytogenetics Technologist Training Program
University of Iowa
Division of Medical Genetics
Department of Pediatrics
Iowa City, IA 52242
(319) 356-3877

Training
MCJ-009123
10/01/88-06/30/93
Project Director:
Shivanand R. Patil, Ph.D.

There is an acute shortage of cytogenetics technologists nationally and especially in the Midwest. We will develop a model program to educate and train individuals in the field of cytogenetics. We have established a full-time 9-month certificate program providing 3 months of didactic preparation and 6 months of clinical experience. We plan to expand the program in the near future from the present class size of 4 to 8 or 10 students.

Pediatric Dentistry Training in Care of Handicapped Children
University of Iowa
College of Dentistry
Department of Pediatric Dentistry
Iowa City, IA 52242
(319) 335-7478

Training
MCJ-000347
07/01/87-06/30/92
Project Director:
Jimmy Pinkham, B.S., D.D.S., M.S.

This project strives to ensure that participating students get exceptional training in recognizing the need for and being able to deliver specialist care that fulfills the oral health needs of chronically impaired and handicapped children (and young adults) or other children with special needs. The curriculum is designed to provide a comprehensive range of clinic, hospital, community, and research activities in an integrated multidisciplinary setting. The financial support of our trainees has allowed for recruitment of some of the best available entering pediatric dentistry graduate students from a national pool. Once on campus, these candidates are expected to grow because of faculty strength, wealth of university resources, clinical facilities, and superior multidisciplinary collaborations within the tertiary health science center here.

University Affiliated Facility at the University of Kansas Medical Center
University of Kansas Medical Center
39th and Rainbow Boulevard
Kansas City, KS 66103
(913) 588-5900

Training
MCJ-000944
07/01/89-06/30/94
Project Director:
Joseph G. Hollowell, Jr., M.D., M.P.H.

The purpose of this interdisciplinary training program is to prepare professionals for leadership roles in the provision of health and related care of children with chronic handicapping conditions and their families. Leadership preparation includes teaching, research, and administrative training. Practicum sites are available across a continuum of handicapping conditions, levels of functioning, and age ranges to ensure relevancy of training, and include hospital, clinic, and community-based programs. Program and resource development with State agencies, including Title V programs, will continue through cooperative planning, training, and service activities.

Intravenous Antibiotic Therapy in Cystic Fibrosis: Home Versus Hospital
Tulane University School of Medicine
1430 Tulane Avenue
New Orleans, LA 70112
(504) 588-5601

Research
MCJ-220556
05/01/87–10/31/90
Project Director:
William W. Waring, M.D.

The purpose of this study is to compare two treatment locations—hospital and hospital/home—for use of intravenous antibiotics on patients who have cystic fibrosis and who experience acute pulmonary exacerbations. The study compares the safety, efficacy, cost, and psychosocial effects of the two places of treatment.

Louisiana Pediatric Pulmonary Center
Tulane University School of Medicine
1430 Tulane Avenue
New Orleans, LA 70112
(504) 588-5601

Training
MCJ-000952
07/01/85–06/30/90
Project Director:
Robert C. Beckerman, M.D.

The goal of the Louisiana Pediatric Pulmonary Center (LPCC) is to reduce morbidity and mortality of pediatric pulmonary disease by means of an interdisciplinary training and model care program. LPPC trains fellows in pediatric pulmonary medicine (3 years) and long-term (1 year or more) master's candidates in nursing, nutrition, and social work. Training is done by clinical supervision, didactic presentations, conferences, and research requirements. Outpatient and inpatient care is provided to infants, children, and young adults with acute and chronic pulmonary disease including cystic fibrosis, asthma, and bronchopulmonary dysplasia.

National MCH Center for Ensuring Adequate Preparation of Providers
Children's Hospital of New Orleans
200 Henry Clay Avenue
New Orleans, LA 70118
(504) 899-9511, ext. 386

MCHIP
MCJ-225047
10/01/89–06/30/94
Project Director:
A. Joanne Gates, M.D., M.B.A.

The goal of this project is to establish a national center to assist States in ensuring adequate preparation of providers of care for children with complex special health needs. The center will demonstrate effective approaches to preparing care providers of these children; provide assistance to agencies and organizations in developing and coordinating systems of community-based care; and assist States in developing standards for quality assurance in care delivery to these children. Project activities will include conducting orientations in selected States, selecting and preparing a core team in each State to implement a plan to provide technical assistance and consultation, and developing a newsletter and resource library.

Project ABLE—Altering Bowel Learning Effectively
Kennedy Institute for Handicapped Children
707 North Broadway
Baltimore, MD 21205
(301) 522-5455

MCHIP
MCJ-245007
07/01/87–06/30/90
Project Director:
Michael F. Cataldo, Ph.D.

This project addresses the problem of fecal incontinence in children with myelomeningocele by developing an affordable instructional package for health care providers and a parent instruction program in order to help these children develop bowel control. The training program will include a videotape and written provider and parent manuals.

University Affiliated Training Center
Johns Hopkins University School of Medicine
Kennedy Institute for Handicapped Children
707 North Broadway
Baltimore, MD 21205
(301) 550-9483

Training
MCJ-000917
07/01/85–06/30/90
Project Director:
Gary Goldstein, M.D.

The John F. Kennedy Institute for Handicapped Children is a multistate, regional resource center providing advanced professional degree training, exemplary services, internationally recognized research, and community outreach services to children and families. The institute began in 1937 as the Children's Rehabilitation Institute in Reisterstown, Maryland, and moved to its present location at the Johns Hopkins Medical Institutions complex in 1967 when it was first designated as a MCH-funded University Affiliated Facility (UAF). Each year, services are provided to over 6,000 children with a wide range of handicapping conditions.

OT/PT Sc.D. Program in Therapeutic Studies
Boston University
881 Commonwealth Avenue
Boston, MA 02215
(617) 353-2727 or 353-4365

Training
MCJ-000901
07/01/87–06/30/92
Project Director:
Anne Henderson, Ph.D.

The interdisciplinary doctoral program prepares occupational therapists and physical therapists for leadership positions in advanced practice and research with children or prepares them to teach pediatric content in entry level and advanced professional graduate programs. Current projects include development of a new specialization in chronic illness in children, a teaching tutorial, early intervention continuing education, faculty research, and database management.

Regional Program to Improve the Health Status of Children with Rheumatic Diseases
New England Medical Center
Department of Pediatrics, Coordinating Center
750 Washington Street, Box 286
Boston, MA 02111
(617) 956-5071

MCHIP
MCJ-255012
07/01/87–06/30/90
Project Director:
Jane G. Schaller, M.D.

This project seeks to improve the health status of children with rheumatic diseases in New England as measured by reductions in the number of days lost from school by these children. Activities include development of discipline-specific standards of care; education of local school systems, parents, and tertiary center teams; outreach to underserved areas; and development of community-based programs for families, including parent support groups and telephone networks.

Training in Mental Retardation
Eunice K. Shriver Center
200 Trapello Road
Waltham, MA 02254
(617) 642-0230

Training
MCJ-000906
07/01/89–06/30/94
Project Director:
Philip Reilly, M.D., J.D.

Since its inception in 1970, the Shriver Center has provided training to 750 graduate students. In fiscal year 1987, 125 events provided training to 6,000 professionals. Approximately 5,600 clients with mental retardation and other handicaps receive evaluation and program planning at the UAF each year. The UAF established one of the first early intervention programs in the region. It also offered the first demonstration project inservices to siblings of clients with mental retardation, and began the first area program for mentally retarded mothers. Presently, the UAF is the leader in New England, and a national and international leader in the prevention, early detection, and treatment of fetal alcohol syndrome.

University Affiliated Training Center
Children's Hospital of Boston
Fegan 10
300 Longwood Avenue
Boston, MA 02115
(617) 735-6509

Training
MCJ-000928
07/01/85–06/30/90
Project Director:
Allen Crocker, M.D.

This developmental evaluation clinic/child study center is devoted to the concerns of young persons with mental retardation, other developmental handicaps, chronic illnesses, and/or genetic diseases. Activities include advocacy for young persons with mental retardation or other conditions which impinge on development; strategic, interdisciplinary, preservice education for students; diagnostic assessment, therapeutic program planning, and follow-along services for children (and some adults) who are in particular need of developmental assistance; high quality inservice and continuing education to workers in the field; parent training and public education; technical assistance for relevant programs; and research aimed at improving knowledge and insights.

Fellowship Program in Dental Care of Handicapped Children
University of Michigan
School of Dentistry
1011 North University Avenue
Ann Arbor, MI 48109-1078
(313) 764-1523

Training
MCJ-000243
07/01/87-06/30/92
Project Director:
Richard Corpron, D.D.S., M.S., Ph.D.

This project is a training program which prepares dentists for leadership roles in administration, teaching, research, and services in dental health programs for normal and handicapped children. The program offers both an M.S. in pediatric dentistry and a dual degree program (M.S./M.P.H.) in pediatric dentistry and dental public health. The dentistry program integrates the didactic and the clinical with research training, while the dual degree program enables trainees to receive broad training in both disciplines by training individuals in a clinical discipline with experience in formulation and funding of dental health programs for normal and handicapped children. In addition, continuing education programs related to improving the dental treatment of normal and handicapped children are offered each year.

Pediatric Cardiac Care Quality Assurance Consortium
Corporation for the Advancement of Pediatric Cardiac Services
Box 288 UMHC
420 Southeast Delaware Street
Minneapolis, MN 55455
(612) 626-2790

MCHIP
MCJ-275013
07/01/87-06/30/90
Project Director:
James H. Moller, M.D.

This project will develop severity-adjusted outcome standards for the major pediatric cardiac surgical procedures and a review protocol which incorporates these outcome standards. This system will then be incorporated into the ongoing quality assurance programs of pediatric cardiac centers and serve as a model for individual cardiac centers across the Nation.

MCRI Interdisciplinary Training Program
University of Nebraska
Meyer Children's Rehabilitation Institute
444 South 44th Street
Omaha, NE 68131
(402) 559-5233

Training
MCJ-000405
07/01/86-06/30/90
Project Director:
Bruce Buehler, M.D.

This project provides community- and center-based interdisciplinary training to graduate students in 11 disciplines. The program addresses the critical health care needs of Nebraskans while at the same time providing leadership training at the preprofessional and continuing education level. Programs and materials developed at Meyer Children's Rehabilitation Institute are disseminated nationally and regionally.

Development of a Model System of Nutrition Services for Children with Disabilities
New Mexico Health and Environment Department
Public Health Division
MCH Bureau and Nutrition Bureau
Runnels Building, N-3077
Santa Fe, NM 87503
(505) 827-2517 or 827-2350

MCHIP
MCJ-353815
10/01/86-09/30/90
Project Director:
Ann Taulbee

This project seeks to improve the delivery of nutrition services to children of New Mexico's low-income, tricultural, rural population. Activities include a comprehensive needs assessment of existing services; education and training for health professionals, parents, and lay groups; development of nutrition education materials; development and implementation of nutrition screening, assessment, and referral procedures; assessment of funding sources; and publication of a handbook for other nutrition service projects.

Developing Nutrition Services for Children with Special Health Needs
New York State Department of Health and
Health Research, Inc.
Bureau of Nutrition
Corning Towers, Room 859
Albany, NY 12237
(518) 473-8286

MCHIP
MCJ-363827
10/01/86-09/30/90
Project Director:
Janice M. Dodds, Ed.D., R.D.

This project seeks to demonstrate the potential for improved growth and nutrition practices among chronically ill and handicapped children in New York State through the provision of comprehensive and coordinated nutrition care services. Activities include assessing the needs of parents and caretakers, monitoring service delivery, documenting the nutrition problems of the target populations, participating in a regional advisory committee, providing parent and professional education, and providing services to children enrolled at affiliated sites.

Pediatric Pulmonary Center
University of Rochester
601 Elmwood Avenue
Rochester, NY 14642
(716) 275-2464

Training
MCJ-009071
07/01/85-06/30/90
Project Director:
John Brooks, M.D.

The purpose of this project is to develop new models of interdisciplinary education and to become a national model for the interdisciplinary education and regionalized care of pediatric pulmonary patients. The project is also intended to provide a comprehensive and coordinated referral service for all types of pediatric pulmonary patients. Further, project staff intend to increase the capabilities of the various communities to care for pediatric respiratory patients through expanded clinical and educational outreach to eliminate the need for long distance travel to Rochester. Additional resources are being devoted to comprehensive case management of technology-dependent infants and children with chronic respiratory disease.

Pediatric Pulmonary Center, New York City
Mount Sinai School of Medicine
1 Gustave L. Levy Place, Box 1202
New York, NY 10029
(212) 241-7788

Training
MCJ-001069
10/01/85–06/30/90
Project Director:
Meyer Kattan, M.D.

The purpose of the pediatric pulmonary center is to improve community-based care for children with chronic respiratory disease by providing interdisciplinary training of professional personnel and by working together with schools and community-based health care providers. Activities to achieve these objectives include continuing education programs for health care providers, workshops for patients and parents, case management services, and research activities aimed at improving the health of children with pulmonary diseases.

Social Work Training in Maternal and Child Health Care
Syracuse University
School of Social Work
Brockway Hall
Syracuse, NY 13244-6350
(315) 443-5550

Training
MCJ-002036
07/01/89–06/30/92
Project Director:
Claire S. Rudolph, M.S.W., Ph.D.

The School of Social Work at Syracuse University provides a 2-year, 60-credit educational program leading to the M.S.W. degree to prepare students for competent performance and leadership responsibility in the delivery of social work services in maternal and child health. The program builds on an established health care concentration with a subspecialty in maternal and child health. This project introduced education and training for competence in case management, interdisciplinary collaboration, planning and administration of maternal and child health services, and program evaluation.

Training for Maternal and Child Health Leadership in Care of Chronically Ill Children
Albert Einstein College of Medicine
Rose F. Kennedy Center for Mental Retardation
1410 Pelham Parkway South
Bronx, NY 10461
(212) 430-2440

Training
MCJ-000241
07/01/86–06/30/90
Project Director:
Herbert Cohen, M.D.

The Rose F. Kennedy Center for Mental Retardation provides comprehensive interdisciplinary training for medical, dental, and nonmedical professionals in the care of children with mental retardation and developmental disabilities. Emphasis is on: (1) Long-term training of health professionals, including the training of residency physicians for assumption of leadership roles in the field; (2) the clinical training of dental specialists in the care of handicapped children; and (3) internships, fellowships, and long-term clinical experiences for nonmedical professionals. To the program's credit, the fellowship graduates have remained in the field, the majority on a full-time basis, and almost all in leadership positions.

University Affiliated Facility Interdisciplinary Training
Westchester County Medical Center
Mental Retardation Institute
216 Cedarwood Hall
Valhalla, NY 10595-1689
(914) 285-8170

Training
MCJ-009029
07/01/82–06/30/90
Project Director:
William M. Levinson, M.D.

The overall goals for this project include providing interdisciplinary training and continuing education to a wide range of professionals, and providing exemplary services as a basis for training activities. The interdisciplinary training program is based on a comprehensive curriculum, participation in interdisciplinary and disciplinary clinical services, and individual training plans. Followup data on trainees show that the majority enter either administrative/program or clinical service positions. Other accomplishments have occurred in the areas of exemplary service models, technical assistance and dissemination, consultations, and faculty presentations.

University Affiliated Training Center
University of North Carolina at Chapel Hill
School of Medicine
Chapel Hill, NC 27514
(919) 966-1020

Training
MCJ-000916
07/01/65–06/30/90
Project Director:
Melvin Levine, M.D.

This project provides interdisciplinary training to health care professionals within the context of the provision of exemplary services and clinical research. Contracts drawn with a number of institutions and agencies extend the training base of the division and provide mechanisms for entering into the service community in a programmatic manner. Currently, the project supports five trainees, two postdoctoral (pediatrics and psychology) and three predoctoral (administration, physical therapy, and nutrition).

Appalachian Regional Program of Juvenile Chronic Disease
Children's Hospital Medical Center
Elland and Bethesda Avenues
Pavilion 1-29
Cincinnati, OH 45229
(513) 559-4676

MCHIP
MCJ-395033
10/01/88–09/30/91
Project Director:
Daniel J. Lovell, M.D., M.P.H.

This project addresses the identification and management of rheumatic and other chronic childhood diseases in a poverty-stricken, rural, and predominantly Appalachian population. With the cooperation of three universities in two States, and the Kentucky Commission for Handicapped Children, the project will seek to improve the health status of children with chronic diseases by developing secondary level medical care in three rural regions of Kentucky for children with rheumatic diseases and developing secondary level medical care in three rural regions of Kentucky for children with chronic diseases. A comprehensive, community-based, family-centered program will be implemented.

Center for Inherited Disorders of Energy Metabolism
Case Western Reserve University
Rainbow Babies and Children's Hospital
2074 Abington Road
Cleveland, OH 44106
(216) 844-1286

Training
MCJ-009122
10/01/88–06/30/93
Project Director:
Douglas S. Kerr, M.D., Ph.D.

This center addresses the need for advanced professional training and clinical diagnostic services for evaluation and treatment of infants and children who suffer from a group of inherited diseases affecting energy production from metabolism of carbohydrate and fat. These disorders may be associated with mental retardation, muscle weakness, heart disease, and/or sudden infant death syndrome. The goals of the program are to provide advanced training for professionals with career interests in inherited metabolic disorders, to make comprehensive biochemical laboratory diagnostic services available for affected patients, to educate practitioners about recognition and treatment of these disorders, and to facilitate research to improve future diagnosis and treatment of these conditions.

Mental Retardation Training
Ohio State University
1341 Kinnear Road
Columbus, OH 43212-1194
(614) 292-5629

Training
MCJ-000922
07/01/89–06/30/94
Project Director:
Eric G. Handler, M.D., M.P.H.

The Nisonger Center continues to provide a comprehensive and integrated program of training, service, technical assistance, research, and dissemination in the field of developmental disabilities. Central to this mission is the provision of interdisciplinary and multidisciplinary training. Professionals trained in the latest techniques of interdisciplinary service delivery continue to be one of the major problems facing service networks at local, state, regional, and national levels.

University Affiliated Cincinnati Center for Developmental Disorders
University of Cincinnati
Pavilion Building
Elland and Bethesda Avenues
Cincinnati, OH 45229
(513) 559-4688

Training
MCJ-000912
07/01/85–06/30/90
Project Director:
Jack H. Rubinstein, M.D.

This center has a strong clinical service base which provides the foundation for the interdisciplinary training of health and health-related professionals in the diagnosis, treatment, and management of children and adolescents with developmental disabilities and other chronic handicapping conditions. The project provides a variety of experiences to develop knowledge and skills related to health care systems, research, and other relevant topics in order to develop knowledge and behaviors which will impact on the delivery of services. Specialized preservice training programs and continuing education activities are also provided in such areas as genetic counseling for clinical nurse specialists and the nutritional needs of children with chronic illness/handicap.

Family Support Project
Oklahoma State Department of Health
P.O. Box 53551
Oklahoma City, OK 73152
(405) 271-4471

MCHIP
MCJ-405003
07/01/87-06/30/90
Project Director:
Nancy Fire, R.N., M.S.

This project seeks to increase support to children with special health needs by addressing the lack of formal support due to fragmentary services in local communities and the lack of identification and utilization of informal support. Project objectives are to: (1) Facilitate local community groups to address formal support system services needs; (2) enable volunteer parents to visit other families in their communities, thereby enhancing informal support systems; and (3) establish a grassroots network of families and community groups across the State.

Training Program in Communication Disorders
University of Oklahoma Health Sciences Center
Department of Communication Disorders
P.O. Box 26901
Oklahoma City, OK 73190
(405) 271-4214

Training
MCJ-000235
07/01/66-06/30/92
Project Director:
Glenda J. Ochsner, Ph.D.

By means of interdepartmental planning and implementation through the Departments of Otorhinolaryngology, Pediatrics, and Communication Disorders, the overall objective of the project is to provide training and experience in interdisciplinary settings to develop those competencies, skills, and attitudes required for effective performance in the team approach to evaluation and management of the child with communication disorders. Training is provided to graduate students in audiology and speech pathology; resident physicians in pediatrics, otorhinolaryngology, and neurology; medical students; and social work interns.

OHSU Interdisciplinary Training Project in MR/DD
Oregon Health Sciences University
Child Development and Rehabilitation Center
P.O. Box 574
Portland, OR 97207
(503) 279-8317

Training
MCJ-000920
07/01/89-06/30/94
Project Director:
Christopher P.S. Williams, M.D.

The purpose of this project is to enhance the quality of life of persons who are handicapped or health impaired and their families through interdisciplinary training of professionals for leadership roles in serving this population. Its objectives include developing and implementing leadership curriculum for trainees representing 15 professional disciplines; providing an integrated network of exemplary clinical services that are family centered and responsive to the needs of such children and their families; providing training, technical assistance, and consultation to the community to strengthen community-based quality care; collaborating with major State and Federal agencies serving this population; and conducting research focused on prevention and intervention relative to the population. Training consists of guided experience in center-based clinical practicums and community programs closely interwoven with didactic activities.

Primary Care Physicians: Caring for Low-Income Children with Special Health Needs
Western Pennsylvania Caring Foundation, Inc.
Fifth Avenue Place, Suite 3012
Pittsburgh, PA 15222
(412) 255-8127

MCHIP
MCJ-428308
10/01/89–09/30/94
Project Director:
Charles P. LaVallee

In this program, project staff will work with the Pennsylvania Department of Health to establish a model for a statewide program designed to provide coordinated, family-centered, community-based care for chronically ill children. The project aims to provide physicians with the resources necessary to guide the care of a chronically ill child and to give families of chronically ill children the information and support they need to interact effectively with all caregivers. Program activities will include conducting a prevalence survey to determine the parameters of the target population with respect to chronic illness and disability; performing an assessment of primary care physicians in western Pennsylvania with respect to educational needs, awareness of services, and level of knowledge; and providing a continuing medical education program.

Development of Pediatric Pulmonary Care Personnel
University of Puerto Rico
G.P.O. Box 5067
San Juan, PR 00936
(809) 763-4966

Training
MCJ-000950
07/01/85–06/30/90
Project Director:
Pedro Mayol, M.D.

The pediatric pulmonary center operates under the philosophy of quality patient care management within an interdisciplinary framework while simultaneously training professionals in these concepts. Our goals are directed to education and training, patient and community services, and research activities.

Audiology and Speech Training
Vanderbilt University School of Medicine
1114 19th Avenue South
Nashville, TN 37212
(615) 320-5353

Training
MCJ-000217
07/01/84–06/30/92
Project Director:
Fred H. Bess, Ph.D.

This project is designed to train personnel at the master's and Ph.D. levels in speech-language pathology and audiology. The objective is to produce highly qualified professionals who are capable of serving children with communicative handicaps and their families. Special emphasis is placed on increasing the numbers of minorities within the field of communication disorders.

University of Tennessee, Memphis Boling Center for Developmental Disabilities—University Affiliated Program
University of Tennessee at Memphis
711 Jefferson Avenue
Memphis, TN 38105
(901) 528-6512

Training
MCJ-000900
07/01/89–06/30/94
Project Director:
Gerald Golden, M.D.

The center trains personnel representing the following clinical specialities that serve mentally retarded and developmentally disabled populations: Pediatrics, genetics, biochemistry, nutrition, nursing, audiology/speech pathology, social work, psychology, special education, occupational therapy, and physical therapy. It serves as a central resource for program development, information, continuing inservice education, technical assistance, and consultation in the mid-South area.

Baylor Laboratory Training Program
Baylor College of Medicine
1 Baylor Plaza, T-526
Houston, TX 77030
(713) 798-5820

Training
MCJ-009121
10/01/88–06/30/93
Project Director:
Edward R.B. McCabe, M.D., Ph.D.

The Baylor Laboratory Training Program provides training in the use of molecular genetic techniques in the diagnosis of genetic disease. Trainees include graduate students, medical students, postdoctoral fellows (including two supported by this grant), scientists on sabbatical leave, and visiting scientists. An annual 2-day workshop for 100 participants (physicians, genetic counselors, nurses, genetics clinic personnel, clinical laboratory personnel, and representatives of government agencies and community organizations) provides an introduction to state-of-the-art molecular genetic diagnosis. The faculty provide diagnosis and management of rare genetic disorders. The laboratories are refining and developing molecular genetic diagnostic techniques to improve their reliability, efficiency, cost effectiveness, and utility.

Training of Speech-Language Pathologists
Our Lady of the Lake University at San Antonio
411 Southwest 24th Street
San Antonio, TX 78285
(512) 434-6711, ext. 415

Training
MCJ-009099
07/01/87–06/30/91
Project Director:
Anthony Salvatore, Ph.D.

This project provides financial assistance to qualified persons interested in working with children, their mothers, and other family members with communication disorders. The ultimate objectives are to increase the number of qualified speech and language pathologists, and to increase the number of persons qualified to identify and habilitate communication disorders in minority populations.

University Affiliated Center
University of Texas Southwestern Medical Center at Dallas
200 Treadway Plaza
Exchange Park
Dallas, TX 75235
(214) 688-7117

Training
MCJ-002000
07/01/85–06/30/90
Project Director:
Mark Swanson, M.D., M.P.H.

The University Affiliated Center's activities include inservice and preservice training, development of model projects, technical assistance, research, and dissemination. These activities help it fulfill its mission of improving the quality of life for children with developmental disabilities or chronic illnesses and their families. Responsiveness to national, State and local issues enhance the Center's effectiveness.

Automated System for Monitoring Treatment Services for Children with Metabolic and Endocrine Disorders
Vermont Department of Health
Medical Services Division
P.O. Box 70
1193 North Avenue
Burlington, VT 05402
(802) 863-7347

Genetics
MCJ-501002
10/01/89–09/30/90
Project Director:
Darryl Leong, M.D., M.P.H.

The Vermont Newborn Screening Program has no organized system of followup to ensure that children with disorders diagnosed by screening are enrolled in treatment services or to monitor the quality of those services. The goal of this project is to have a system in place to ensure that the families of all children identified by the newborn screening program as having a disorder will have appropriate information and other sources available and will have those services monitored in an appropriate manner.

Children and Adolescents with Special Health Care Needs: Family-Centered Nursing Graduate Specialty
University of Washington
Nursing Department, SC-74
Seattle, WA 98195
(206) 545-1291

Training
MCJ-000909
07/01/84–06/30/93
Project Director:
Patricia Brandt, Ph.D.

This project is designed to be responsive to the health care needs of children and adolescents with handicapping conditions, the health program needs of clinical nurse specialists, and the continuing education and societal needs for graduate nursing education programs. It prepares nurses at the graduate level for specialization and leadership positions in the health care of these children and adolescents.

Comprehensive Training in Mental Retardation and Other Handicapping Conditions
University of Washington
Child Development and Mental Retardation Center
Clinical Training Unit, WJ-10
Seattle, WA 98195
(206) 545-1350

Training
MCJ-000913
07/01/66-06/30/90
Project Director:
Clifford J. Sells, M.D.

The Clinical Training Unit at the Child Development and Mental Retardation Center is dedicated to providing interdisciplinary training programs that ensure that specialized personnel are available to serve with children with developmental disabilities and their families. A variety of center and community-based programs provide the arena for training based on exemplary services.

Pediatric Pulmonary Training Center
University of Washington
School of Medicine
Department of Pediatrics, RD-20
Seattle, WA 98195
(206) 543-3200

Training
MCJ-000955
07/01/85-06/30/90
Project Director:
Gregory J. Redding, M.D.

The purpose of the Pediatric Pulmonary Training Center at the University of Washington in Seattle is to train experts and leaders in medicine, nursing, nutrition, social work, and physical therapy who will provide and teach exemplary comprehensive care for children with pulmonary disorders, emphasizing family-centered, community-based care techniques and resource utilization. Graduates from each discipline will learn to conduct clinical and basic research on an individual and collaborative basis concerning topics involving lung biology, and prevention, diagnosis, and care of lung disease in children. The didactic and clinical curriculums provided by core faculty in each of these disciplines within the major tertiary referral hospital for pediatric pulmonary disease in the Pacific Northwest, in conjunction with graduate classes within the professional schools of the University of Washington, provide the means to accomplish these training objectives.

Case Management of PKU and Galactosemia in West Virginia
West Virginia University
Health Sciences Center
Department of Pediatrics/Genetics
Morgantown, WV 26506
(304) 293-7331

Genetics
MCJ-541003
10/01/89-09/30/90
Project Director:
John C. Baker, M.D.

The goal of this project is to develop a system of case management in conjunction with an existing community outreach network of genetics clinics in order to: (1) Ensure that all newborns are appropriately screened for PKU and galactosemia; (2) improve the medical care and nutrition management for children with PKU and galactosemia; (3) improve family understanding of their child's problem and nutritional needs, and community resources that are available; (4) identify and improve community services for these patients; and (5) enhance the families' ability to access local services.

Interdisciplinary Education and Training of Physical Therapists
University of Wisconsin at Madison
School of Allied Health Professions
2120 Medical Sciences Center
1300 University Avenue
Madison, WI 53706
(608) 262-6800

Training
MCJ-009102
10/01/87–06/30/92
Project Director:
Kenneth J. Ottenbacher, Ph.D.

The primary purpose of this project is to educate and train pediatric occupational and physical therapists to provide exemplary service, research, and leadership in dealing with handicapped children and their families. Five trainees per year, supported by MCH funding, receive education and training in the context of the M.S. in therapeutic science degree program at the University of Wisconsin at Madison. The graduate program is an interdisciplinary program with a strong focus on pediatric content and research/evaluation skills. Faculty and graduate students engage in collaborative research that results in publication, papers, and continuing education activities.

Transitions in Pediatric Pulmonary Care Training
University of Wisconsin at Madison
Department of Pediatrics
600 Highland Avenue
Madison, WI 53792
(608) 263-8555

Training
MCJ-009072
10/01/85–06/30/90
Project Director:
Elaine Mischler, M.D.

The emphasis of this pediatric pulmonary center is interdisciplinary training in the understanding, approach, and delivery of effective patient care with the following four critical transition points: Transition from intensive care delivered in a neonatal intensive care unit to the general pediatric unit and ultimately to the general pediatrician or pediatric pulmonologist; transition of the adolescent from pediatrics to the internal medicine care setting; transition of the chronically ill pulmonary patient to the home setting; and transition of the chronically ill child from the home into the community.

Waisman Center University Affiliated Program
University of Wisconsin at Madison
Waisman Center on Mental Retardation and
Human Development
1500 Highland Avenue
Madison, WI 53705
(608) 263-7108

Training
MCJ-000915
07/01/89–06/30/94
Project Director:
Raymond Chun, Ph.D.

The mission of the Waisman Center University Affiliated Program is to improve the lives of persons with chronic handicapping conditions and their families. In order to do this, the primary goal of the UAP is to provide interdisciplinary training for professionals who will serve persons with handicaps and their families. Other goals include the provision of exemplary clinical/educational services to persons with chronic handicapping conditions, the sharing of the resources of the Waisman Center through outreach activities, and the conduct of research related to human development and chronic handicapping conditions.

Children with Special Health Needs

Technology Dependent, Medically Fragile

High-Tech Home Care for Children with Chronic Health Conditions
University of Kentucky
College of Nursing
Kinkead Hall 0057
University Station
Lexington, KY 40506

Research
MCJ-210577
10/01/89-09/30/91
Project Director:
Juanita W. Fleming, Ph.D.

The objective of this study is to create a data base that will aid in further describing technology-dependent children being cared for in their homes. Specific aims are to: (1) Identify selected demographic characteristics of technology-dependent children and their families; (2) define home care of technology-dependent children in terms of consumption of resources; (3) test selected hypotheses regarding the effects of the illness of these children on their families; and (4) provide the means for these data to be used by others in the development of recommendations for nursing practice relating to the care of technology-dependent children and their families. Thirteen cities in the United States will serve as areas from which data will be collected. Using structured interviews, data will be obtained from parents receiving services from private and public home health agencies.

Model for Home and Community Care for Children Who are Technology Assisted
Coordinating Center for Home and Community Care
P.O. Box 613
Millersville, MD 21108
(301) 987-1048

MCHIP
MCJ-245023
10/01/87-06/30/90
Project Director:
Joanne Kaufman, R.N., M.S.

This project develops a model for public/private sector collaboration in financing and case managing home care for technology-assisted children. The project also develops a methodology for educating professionals in case management for family-centered care; identifies and analyzes alternatives to hospitalization; provides family-centered case management services to over 300 Maryland children funded by Medicaid or third-party payers; and publishes monographs on family-centered case management.

State Census of Technology-Dependent Children
Children's Hospital Corporation
300 Longwood Avenue
Boston, MA 02115

Research
MCJ-250590
10/01/89-09/30/91
Project Director:
Judith S. Palfrey, M.D.

This study will be a census of all children defined as depending on extraordinary nursing services on a daily basis. Because this study will be longitudinal, we will be able to trace the prevalence of these conditions over time and look at changes within device use or in specific diseases, as well as changes in the etiologies of medical dependency. These data should be useful for program planning purposes as well as for tracking preventable causes of long-term disability.

Community-Based Medical/Educational Program
Ken-Crest Centers
1 Plymouth Meeting, Room 620
Plymouth Meeting, PA 19462
(215) 844-4620

MCHIP
MCJ-428305
10/01/89-09/30/94
Project Director:
Mary Ellen Caffrey, Ph.D.

This project will add pediatric and nursing components to an existing early intervention program so that it can accommodate technology-dependent children. The center will use a coordinated approach to provide medical services, under which an individual pediatric service plan (IPSP) will be developed for each child. Target children will receive daily developmental programming which will include training in cognitive, motor, social, language, and self-help development. The project also will feature a parent training and advocacy component that aims to teach parents how to deal more effectively with their children's special medical and developmental needs.

Benefits of an Interdisciplinary Approach to Feeding Aversion: A Feeding Needs Project
University of Wisconsin at Madison
750 University Avenue
Madison, WI 53706
(608) 263-6477

MCHIP
MCJ-555010
07/01/87-06/30/90
Project Director:
C.D. Schoenwetter, M.D.

The purpose of this project is to develop a high quality, comprehensive service delivery model for medically fragile children with special needs, their families, and health care providers. Project goals include enhancing all aspects of child development related to feeding; providing an interdisciplinary team as a resource in the home community; developing an interagency linkage system to coordinate services; and developing strategies to prevent feeding aversion in future medically fragile populations.

Children with Special Health Needs

Cooley's Anemia, Thalassemia

AAPCHO Thalassemia Screening and Counseling Project
Association of Asian/Pacific Community
Health Organizations
310 Eighth Street, Suite 210
Oakland, CA 94607
(415) 272-9536

Genetics
MCJ-061009
10/01/88-09/30/91
Project Director:
Laurin Mayeno

The goal of this project is to increase access to thalassemia screening, counseling, and education services for Southeast Asian refugee patients at Association of Asian/Pacific Community Health Organizations (AAPCHO) centers. Project activities include developing a screening protocol, developing a computerized tracking system for prevalence rates and followup, developing and implementing plans for each center, and compiling and evaluating existing materials for accuracy and cultural relevance.

Comprehensive Hereditary Anemia Program for Hawaii
University of Hawaii
J.A. Burns School of Medicine
Department of Genetics
2540 Maile Way, Box 4C
Honolulu, HI 96822
(808) 948-6834

Genetics
MCJ-151002
10/01/89-09/30/92
Project Director:
Yujen E. Hsia, M.D.

This project aims to screen diverse Asian populations living in Hawaii for hemoglobin or glucose-6-phosphate dehydrogenase variants in order to determine how best to detect all possible combinations of these variants; estimate their gene frequencies; record their clinical manifestations; and assess the effects of early detection, genetic counseling, fetal diagnosis, and integrated health management. The program provides education to communities and physicians, written explanations accompanying diagnoses to heterozygotes, and longitudinal comprehensive care to anemic patients in cooperation with their primary physicians.

Comprehensive Care for Cooley's Anemia Thalassemia
New England Thalassemia Program/Developmental
Evaluation Clinic
300 Longwood Avenue
Boston, MA 02115
(617) 735-6501

Genetics
MCJ-251005
07/01/88-06/30/91
Project Director:
Allen C. Crocker, M.D.

The overall goal of the New England Thalassemia Program is to improve the quality of treatment for patients with thalassemia. Project objectives are to: (1) Disseminate information and provide community education about thalassemia, (2) identify all patients and carriers in the Region I area, (3) provide comprehensive medical care for Region I thalassemia patients, (4) provide services to promote optimal quality of life, (5) address challenges in providing services to the high-risk Southeast Asian refugee population, and (6) participate in and enhance the implementation of clinical research.

South Cove Thalassemia Screening and Education Program
South Cove Community Health Center
885 Washington Street
Boston, MA 02111
(617) 482-7555

Genetics
MCJ-251004
10/01/87–09/30/90
Project Director:
Linda J. Ott, M.D.

This project uses an intradepartmental, multidisciplinary approach to provide screening, case finding, and counseling services. Specific program objectives are to increase identification of patients with thalassemias through blood tests; to provide counseling, education, and support for these patients and for those at risk for trait; and to increase patient and community awareness of the disease and its control through individual and community education efforts.

New York State Cooley's Anemia Program
University of Rochester School of Medicine
Division of Genetics
601 Elmwood Avenue
Rochester, NY 14642
(716) 275-3461

Genetics
MCJ-361007
10/01/88–09/30/91
Project Director:
Peter T. Rowley, M.D.

The purpose of this program is to provide expert medical care and counseling for affected patients and their families; to provide screening and genetic counseling for the general population in order to detect carriers; and to provide education for health professionals and the general public about this group of diseases. New York State has established four centers to provide these services, each at an outstanding medical center within the State—Cornell University Medical College–New York Hospital and Columbia Presbyterian Medical Center–Babies Hospital, both in New York City; the University of Rochester School of Medicine–Strong Memorial Hospital in Rochester, New York; and the State University of New York at Buffalo–Erie County Medical Center in Buffalo, New York.

Children with Special Health Needs

Hemophilia/AIDS

Mountain States Regional Hemophilia Center Program
University of Arizona Health Sciences Center
Department of Pediatrics
1501 North Campbell Avenue
Tuscon, AZ 85724
(602) 626-6527

Hemophilia
MCJ-042002
10/01/85-09/30/90
Project Director:
James J. Corrigan, Jr., M.D.

Using a regionalized multidisciplinary team approach, the Mountain States Regional Hemophilia Center Program works toward the achievement of a series of objectives, including, but not limited to: Assessing the type and severity of hemophilia and other less frequently encountered congenital bleeding disorders; detecting inhibitors; performing periodic comprehensive evaluations; providing HIV screening, medical evaluation, and studies of immune function; teaching home (self-infusion) therapy; providing social, psychiatric, vocational, and genetic counseling; participating in investigative studies relating to hemophilia and its complications; and testing new clotting factor concentrates.

Hemophilia Diagnostic and Treatment Centers
Arkansas Children's Hospital
800 Marshall Street
Little Rock, AR 72202-3591
(501) 371-9192

Hemophilia
MCJ-052001
10/01/85-09/30/90
Project Director:
Morris Kletzel, M.D.

The Region VI Comprehensive Hemophilia Network is organized according to five comprehensive treatment centers (located in Dallas, Houston, Little Rock, Oklahoma City and San Antonio) and their respective satellite clinics. Identifying and serving every individual with comprehensive clinical services in Region VI is a significant logistical undertaking, upon which the necessity for HIV risk reduction counseling and education for not only the hemophilia patient, but his sexual partner(s) as well, has been superimposed. For this effort in particular, a sharing of resources and personnel between two or more of the existing hemophilia treatment centers/satellites becomes essential. Such sharing of expertise for extending the comprehensive care/risk reduction mandate also involves establishing linkages with other professional and lay organizations who share responsibility for providing similar services to other populations.

Case Management Demonstration Program for Pediatric Patients and Families in Los Angeles County
California Children's Services
Los Angeles County Department of Health Services
2064 Marengo Street
Los Angeles, CA 90033
(213) 226-2405

Pediatric AIDS
BRH-P09001
08/01/88-07/31/91
Project Director:
Dale Garell, M.D.

The Los Angeles Pediatric AIDS Network (LAPAN) has begun to develop and implement an automated case management system for pediatric HIV/AIDS patients and their families. Through the automated system, hospital-based perinatal programs will track mothers at risk for HIV infection, and will provide ongoing followup for infants born to mothers testing positive for HIV.

Children's Hospital of Los Angeles Southern California Comprehensive Hemophilia Center
Children's Hospital of Los Angeles
Division of Hematology/Oncology
4650 Sunset Boulevard, Box 54
Los Angeles, CA 90027
(213) 669-2339

Hemophilia
MCJ-062009
10/01/86-09/30/90
Project Director:
Edward D. Gomperts, M.D.

The Southern California office serves as both the regional office and the coordinator for the Southern California treatment centers, with responsibility to Hawaii and the other islands. There are nine treatment centers of various sizes in Southern California. In Hawaii, hemophilia care, while provided by private physicians, is coordinated by the Hemophilia Foundation of Hawaii. Administratively, the AIDS Help and Prevention Plan (AHPP) office receives and distributes Federal funds earmarked for risk reduction activity in the region, and has historically provided the leadership and coordination of those risk reduction activities.

CHMC-UCSF Northern Coastal California Hemophilia Program
Children's Hospital Medical Center of Northern California
Department of Hematology
747 52nd Street
Oakland, CA 94609
(415) 428-3372

Hemophilia
MCJ-062008
10/01/86-09/30/90
Project Director:
Joseph Addiego, Jr., M.D.

The Children's Hospital Medical Center/University of California at San Francisco Northern Coastal California Hemophilia Center provides comprehensive hemophilia care and HIV-related services for all patients in a 14-county region. Major goals include continuing present services for our patients and their providers, expanding services to underserved individuals, and participating in clinical research studies to improve future care. One of the principal objectives continues to be that of serving as a resource for families and care providers who manage bleeding problems in their local health care communities. To maximize effectiveness as a regional center, education of patients, families, and community providers will remain a primary goal.

Collaborative Study of the Effects of HIV on Development of Hemophilic Children
Children's Hospital of Los Angeles
4650 Sunset Boulevard
Los Angeles, CA 90027
(213) 660-2450

Research
MCJ-060570
05/01/88-04/30/93
Project Director:
Edward D. Gomperts, M.D.

This project will examine a very important group of children who are infected with HIV. The patients to be studied include children with hemophilia who received repeated infusions of clotting factor concentrate derived from pooled human plasma prior to routine screening of the blood supply. A prospective longitudinal study will examine changes in neurological and neuropsychological functioning, physical growth and development, and immunological status in hemophilic children exposed to HIV and in matched control groups of HIV-negative children with hemophilia and siblings of children with hemophilia.

Hemophilia Center
Orthopaedic Hospital
2400 South Flower Street
P.O. Box 60132
Terminal Annex
Los Angeles, CA 90007-2697
(213) 742-1357

Hemophilia
MCJ-062001
10/01/86-09/30/90
Project Director:
Carol K. Kasper, M.D.

The goals of this project are to: (1) Prevent new cases of HIV infection in sexual partners and offspring of persons with hemophilia; (2) Reduce morbidity in persons with hemophilia (with emphasis on management of HIV disease, excessively frequent hemorrhaging, arthropathy, and dental disease); and (3) Establish carrier status in at-risk female relatives of persons with hemophilia A and B.

UCD Northern Central California Hemophilia Program
UCD Medical Center at Sacramento
Department of Pediatrics
4301 X Street
Sacramento, CA 95817
(916) 453-2782

Hemophilia
MCJ-062007
10/01/86-09/30/90
Project Director:
Charles F. Abildgaard, M.D.

The University of California at Davis (UCD) Northern Central California Hemophilia Program provides comprehensive diagnostic and treatment services for individuals with hemophilia and von Willebrand disease who live within its catchment area. The goals of the center are to furnish the best medical treatment possible; provide education to patients, families, care providers, agencies, and center staff; cooperate with consumer organizations; and conduct research to benefit the patient population. These goals are being achieved through clinical services, cooperation and consultation, group meetings, individual contracts, mailings, telephone interviews, and videos.

Mountain States Regional Hemophilia Center
University of Colorado Health Sciences Center
Department of Pediatrics
4200 East Ninth Avenue, Box C222
Denver, CO 80262
(301) 394-8471

Hemophilia
MCJ-082002
10/01/85-09/30/90
Project Director:
William E. Hathaway, M.D.

Using a multidisciplinary team approach, the Mountain States Regional Hemophilia Center Program will work toward the achievement of a series of objectives, including, but not limited to: Assessing the type and severity of hemophilia and other less frequently encountered congenital bleeding disorders; detecting inhibitors; performing periodic comprehensive evaluations; providing HIV screening, medical evaluation, and studies of immune function; teaching home (self-infusion) therapy; providing social, psychiatric, vocational, and genetic counseling; participating in investigative studies relating to hemophilia and its complications; and testing new clotting factor concentrates.

Comprehensive Hemophilia Center
Children's Hospital National Medical Center
Department of Hematology/Oncology
111 Michigan Avenue, N.W.
Washington, DC 20010
(202) 745-2140

Hemophilia
MCJ-112002
10/01/85–09/30/90
Project Director:
Craig Kurler, M.D.

This project's objectives include the development of a quarterly regional newsletter which will communicate hemophilia-related administrative, clinical, and research items of interest to the treatment center network; the development of a regionwide hemophilia and HIV patient data base; and the coordination of patient vocational counseling and rehabilitation services as well as continuing training and education for AIDS risk reduction staff.

Pediatric AIDS Health Care Demonstration Project
Public Health Trust—Dade County Florida
1611 Northwest 12th Avenue
Miami, FL 33136
(305) 549-7744

Pediatric AIDS
BRH-P04010
08/01/88–07/31/91
Project Director:
Philip J. Plummer

This project's purpose is to expand and enhance SFAN to provide comprehensive, coordinated services for at-risk and HIV-infected mothers and children, emphasizing service delivery in outpatient and community-based settings. Linkages among all levels of care are coordinated centrally at Jackson Memorial Hospital by case manager/social worker teams. A project pediatrician serves as liaison with community primary care providers for consultation and referral of infants. The hospital's pediatric immunology clinic provides training and clinical rotations for community physicians to prepare them for providing primary care and management of HIV-infected children.

Pediatric AIDS Community Demonstration Project
Georgia Department of Human Resources
Division of Public Health
878 Peachtree Street, N.E., Room 214
Atlanta, GA 30309
(404) 894-6622

Pediatric AIDS
BRH-P04005
08/01/88–07/31/91
Project Director:
Virginia D. Floyd, M.D.

This project is administered by the State of Georgia Division of Public Health (DPH). DPH subcontracts with four metropolitan Atlanta organizations to provide services. The project's purposes are to: (1) Provide and coordinate multidisciplinary, medical, and social services to HIV-positive children and their families; (2) improve service delivery for infected children and their families by developing a community-based service network; and (3) prevent HIV infection in women, children, and adolescents through outreach and education of high-risk populations.

Great Plains Regional Comprehensive Care for Hemophilia Diagnosis
University of Iowa
Department of Pediatrics
2520 Colloton Pavilion
General Hospital
Iowa City, IA 52242
(319) 356-3422

Hemophilia
MCJ-192002
10/01/85-09/30/90
Project Director:
C. Thomas Kisker, M.D.

This project is designed to address problems occurring at hemophilia centers in Region VII. Specifically, the project will seek to (1) persuade inactive hemophilia patients to attend annual comprehensive clinics; (2) continue to provide quality comprehensive health care services despite decreasing funds; (3) increase the knowledge of hemophilia/AIDS and improve the continuity of care; (4) ensure that all hemophilia patients have adequate supplies of treatment products; and (5) reduce the transmission of HIV. Strategies include patient followup, fundraising efforts, educational workshops, discussion of treatment alternatives, and patient counseling regarding HIV risk reduction techniques.

Pediatric AIDS Program
Children's Hospital of New Orleans
200 Henry Clay Avenue
New Orleans, LA 70118
(504) 866-2993

Pediatric AIDS
BRH-P06030
08/01/88-07/31/91
Project Director:
Michael Kaiser, M.D.

Children's Hospital of New Orleans administers the Pediatric AIDS Program (PAP) to develop a coordinated system of care and services for HIV-infected mothers and children up to age 13 in the New Orleans metropolitan area. The project is designed for a child-centered, family-focused approach to: (1) Provide comprehensive care and services for all medical and social services needs, and (2) use case management for coordinating services and followup throughout the community.

Boston Pediatric AIDS Project
Dimock Community Health Center
55 Dimock Street
Roxbury, MA 02119
(617) 442-8800 or 442-8802

Pediatric AIDS
BRH-P01026
08/01/88-07/31/91
Project Director:
Jackie Jenkins-Scott, M.S.W.

The project unites the efforts of a coalition of nonprofit community health centers, home health care agencies, hospitals, and AIDS service organizations in the Boston metropolitan area to reach HIV-infected and high-risk women and children at the sources of entry into the health and social service system, and keep them in the system in order to: (1) Prevent further transmission of HIV, and (2) reduce the high cost of hospitalization by increasing their access to the use of lower cost community- and home-based services.

New England Area Comprehensive Hemophilia Center
Medical Center of Central Massachusetts—Memorial
119 Belmont Street
Worcester, MA 06105
(617) 793-6488

Hemophilia
MCJ-252002
10/01/87–09/30/90
Project Director:
Peter H. Levine, M.D.

The goal of the seven hemophilia centers in the New England region (Region I) is to provide cost effective comprehensive care to hemophiliacs and their families by coordinating regional resources and integrating already existing health services. In addition, the region will work toward achieving the national goal of preventing transmission of HIV to sexual partners and their offspring through identification of partners and education, counseling, and HIV antibody testing of hemophiliacs and their sexual partners.

Model Program for Pediatric AIDS Prevention and Control in Michigan
Michigan Department of Public Health
Office of Maternal and Child Health
3423 North Logan Street
P.O. Box 30195
Lansing, MI 48909
(517) 335-8900

Pediatric AIDS
BRH-P05032
08/01/88–07/31/91
Project Director:
George Baker, M.D.

This project's goals are to expand the State's capability to prevent and treat perinatal AIDS. The project activities are based upon results of a 1988 statewide needs assessment by a Maternal and Infant Task Force on AIDS convened by the Michigan Department of Public Health. The task force identified three major service gaps and barriers that will be addressed by this project: (1) Lack of comprehensive outpatient treatment centers for HIV-infected women and children; (2) shortage of trained personnel; and (3) lack of effective case management.

Region V East Hemophilia Treatment Center and AIDS Risk Reduction Network
Hemophilia Foundation of Michigan
411 Huron View Boulevard, Suite 101
Ann Arbor, MI 48103
(313) 761-2535

Hemophilia
MCJ-262003
10/01/83–09/30/90
Project Director:
Sally O. Crudder, R.N.

The major regional goals of this project are to: (1) Maintain a regionalized network of comprehensive and AIDS risk reduction programs which provide comparable comprehensive care, treatment, and education; (2) coordinate the consistent collection of data from participating hemophilia treatment center programs to establish the efficiency and effectiveness of the comprehensive care model and the AIDS risk reduction effort, and; (3) encourage efforts to identify other funding sources to support hemophilia treatment center and AIDS risk reduction activities.

Strictly Confidential: Confidentiality Practice and Proposed Guidelines Regarding Newborns and Mothers
Creighton University
Center for Health Policy and Ethics
California and 24th Streets
Omaha, NE 68178
(402) 280-2017

Pediatric AIDS
BRH-PB0702
08/01/89-07/31/90
Project Director:
Charles J. Dougherty, Ph.D.

Creighton University's Center for Health Policy and Ethics will conduct a 2-year study of confidentiality in the diagnosis and care of newborns and mothers with HIV infection and AIDS. Onsite interviews will be conducted with professionals in eight major U.S. cities to determine the practical challenges of maintaining confidentiality with this patient population.

Development of a Statewide Health Services Network for Children with HIV Infection and Their Families
New Jersey State Department of Health
Special Child Health Services
CN 364
Trenton, NJ 08625
(609) 292-5676

Pediatric AIDS
BRH-P02011
08/01/88-07/31/91
Project Director:
Barbara Kern, M.A.

The New Jersey State Department of Health administers this demonstration project through its Title V program, Special Child Health Services (SCHS), to develop a statewide network of Regional Pediatric Treatment Centers in designated communities. The purpose of this network is to promote, advocate, and provide comprehensive, coordinated, family-focused services to children with HIV infection and their families. The project will link the regional centers with SCHS, which has successfully developed a statewide network of services for children requiring specialized pediatric care.

New Jersey Regional Hemophilia Program and AIDS Supplement
University of Medicine and Dentistry of New Jersey
Robert Wood Johnson Medical School
1 Robert Wood Johnson Place
CN 19
New Brunswick, NJ 08901
(201) 937-7679

Hemophilia
MCJ-312002
10/01/87-09/30/90
Project Director:
Parvin Saidi, M.D.

The objective of this project is to continue the New Jersey Regional Hemophilia Program and expand its operation in providing high quality care to the more than 800 estimated patients in New Jersey with hemophilia and related bleeding disorders. In addition to this broad objective, we recognize and define as a separate program objective the dissemination of correct and constructive information on AIDS (including ways to reduce the risk of transmission) and the provision of psychological support and stress management services for all of our patients and their immediate relatives and/or significant others.

AIDS Prevention Services by Health Providers for Homeless, Runaway, and Non-School Youth
ODN Productions
74 Varick Street #304
New York, NY 10013
(212) 432-6332

Pediatric AIDS
BRH-PB0204
08/01/89-07/31/90
Project Director:
Oralee Wachter

Hundreds of thousands of sexually active teenagers are not in school (i.e., dropouts, runaways, and homeless). They are missing AIDS education units in classrooms, and they are likely repeating behaviors which place them at risk of HIV infection and transmission. They are the hardest to reach with AIDS information and services. This project will design a new version of "Sex, Drugs, & AIDS," a pioneering AIDS prevention videotape, and a new curriculum for adult health information and health services professionals.

Bronx Pediatric AIDS Consortium
Albert Einstein College of Medicine
1300 Morris Park Avenue
Bronx, NY 10461
(212) 294-2497

Pediatric AIDS
BRH-P02049
08/01/89-07/31/92
Project Directors:
William Caspe, M.D.
Joanne Lukomik, M.D.

The Bronx Pediatric AIDS Health Care Demonstration Project is a collaborative effort of the major health care institutions and community-based organizations which provide care to HIV-infected women, infants, and children in the borough of the Bronx. The principal participants in this consortium will combine resources in an effort to enhance the delivery of coordinated, comprehensive, case-managed health care to their constituent populations.

Brooklyn Pediatric AIDS Demonstration Project
State University of New York
Health Science Center at Brooklyn
450 Clarkson Avenue
Brooklyn, NY 11203
(718) 270-1828

Pediatric AIDS
BRH-P02047
08/01/89-07/31/90
Project Director:
Herman Mendez, M.D.

The goals of this project are to: (1) Promote communication among pediatric health care and service providers and to coordinate and expand medical, educational, developmental, and social services for an increasing population of infants and children and their families with or at risk for HIV infection; (2) identify infants, children, and adolescents with or at risk for HIV infection and their families, so as to provide appropriate assessment, medical management, and access to treatment as it becomes necessary; and (3) provide case management and social services in order to stabilize and support families with or at risk for having HIV-infected children.

Comprehensive Hemophilia Diagnostic and Treatment Center
Long Island Jewish Medical Center
Lakeville Road
New Hyde Park, NY 11042
(718) 470-7380

Hemophilia
MCJ-362006
10/01/87–09/30/90
Project Director:
Richard A. Lipton, M.D.

The objectives of this project are to: (1) Identify all persons with coagulation disorders in the Long Island Jewish Medical Center (LIJ) catchment area; (2) assure that quality comprehensive care is available and accessible to all identified patients; (3) educate and address the needs of patients, families, health care providers, and the community regarding the treatment and management of coagulation disorders and general comprehensive care issues; (4) manage blood resources, reduce costs, and deliver quality care in a cost-effective and equitable manner; (5) collaborate with and utilize the scientific expertise of our staff to do clinical and basic research of potential benefit to patients; and (6) implement an AIDS/HIV infection prevention program to reduce the risk and psychosocial impact of AIDS/HIV for patients, families, and providers.

Family AIDS Case Management Program
New York City Human Resources Administration
Division of AIDS Services
330 West 34th Street, Room 311
New York, NY 10001
(212) 790-3163

Pediatric AIDS
BRH-P02046
08/01/88–07/31/91
Project Director:
Steven Fisher

This project provides ongoing case management services to support families with AIDS in Brooklyn, Upper Manhattan, and the Bronx—areas that have the Nation's highest reported levels of HIV infection in women and children. With the aim of keeping families intact, children and adults with AIDS receive assistance throughout the course of their illness, and their families receive additional support following their death.

Model Comprehensive Health Care Program for Adolescents
Montefiore Medical Center
Adolescent AIDS Program
111 East 210 Street (NW674)
Bronx, NY 10467
(212) 960-6612

Pediatric AIDS
BRH-P02050
08/01/89–07/31/90
Project Director:
Karen Hein, M.D.

The purpose of this project is to establish a model comprehensive health care program for adolescents ages 13–21 at high risk for or infected with HIV or AIDS in New York City. The project goals and objectives are to: (1) Develop, implement, and document a model for providing comprehensive medical and psychosocial services to adolescents at risk for or infected with HIV; (2) provide effective outreach and collaboration with existing medical and social service agencies in New York City; and (3) disseminate the model of comprehensive clinical services, and provide advocacy and technical assistance to youth-serving agencies gearing up services for high-risk or HIV-positive adolescents outside New York City.

Mount Sinai Medical Center—Cornell University Medical Center
Comprehensive Hemophilia Diagnostic and Treatment Center
Mount Sinai Hemophilia Center
Department of Medicine
100th Street and Fifth Avenue
New York, NY 10029
(212) 876-8701

Hemophilia
MCJ-362001
10/01/87–09/30/90
Project Director:
Louis M. Aledort, M.D.

The objectives of this project are to: (1) Identify all persons with coagulation disorders in the Mount Sinai Medical Center—Cornell University Medical Center catchment area; (2) reach out to satellite centers and Puerto Rico and assure that quality comprehensive care is available and accessible to all identified patients; (3) educate and address the needs of patients, families, health care providers, and the community regarding the treatment and management of coagulation disorders and general comprehensive care issues; (4) manage blood resources, reduce costs, and deliver quality care in a cost-effective and equitable manner; (5) collaborate with and utilize the scientific expertise of our staff to do clinical and basic research of potential benefit to the patients; and (6) implement an AIDS/HIV infection prevention program to reduce the risk and psychosocial impact of AIDS/HIV for patients, families, and providers.

National Hemophilia Program on AIDS Risk Reduction and Comprehensive Care
National Hemophilia Foundation
The Soho Building
110 Greene Street, Suite 406
New York, NY 10012
(212) 219-8180

Hemophilia
MCU-362007
10/01/89–09/30/90
Project Director:
Alan Brownstein, M.P.H., M.S.W.

With emphasis on the national goal of preventing the further sexual and perinatal transmission of HIV, the National Hemophilia Foundation will create a National Hemophilia and AIDS Information Center and will organize its AIDS Education and Preventive Service and Comprehensive Care Services to provide risk reduction data and other data collection activities, educational programs, information dissemination, and outreach services in an integrated fashion.

Northern Manhattan Women and Children HIV Demonstration Project
Columbia University
School of Public Health
600 West 168th Street
New York, NY 10032
(212) 928-5103

Pediatric AIDS
BRH-P02027
08/01/88–07/31/91
Project Director:
Zena A. Stein, M.D.

The aim of the project is to integrate the area's AIDS prevention efforts and services for the target population. Five major area hospitals have subcontracted with Columbia University to provide comprehensive services to HIV-infected and at-risk women and children in the predominantly low-income, black, and Hispanic communities of upper Manhattan.

Pediatric AIDS Ethical and Policy Issues
Columbia University
School of Public Health
600 West 168th Street, Seventh Floor
New York, NY 10016
(212) 305-1957

Pediatric AIDS
BRH-PB0203
08/01/89-07/31/90
Project Director:
Ronald Bayer, Ph.D.

The Columbia University School of Public Health will organize a program to provide clinicians in pediatric AIDS projects funded by the Health Resources and Services Administration with an opportunity to examine in a systematic way the ethical and policy challenges posed by their work. At times the goal will be to underscore the ethical principles that ought to undergird clinical and public policy regarding women and children with HIV infection. On other occasions we hope to elucidate the ethical and policy complexity with which practitioners are confronted. In short, we hope to strengthen the capacity of those facing the challenges of perinatal transmission to think more clearly about the ethical context within which their work takes place.

Upstate New York Regional Comprehensive Hemophilia and AIDS Risk Reduction Programs
Mary M. Gooley Hemophilia Center, Inc.
1425 Portland Avenue
Rochester, NY 14621
(716) 544-3630

Hemophilia
MCJ-362005
10/01/87-09/30/90
Project Director:
Joyce Strazzabosco

The major goals of this comprehensive program are to control bleeding episodes so as to avoid the crippling effects of joint disease, and to enable patients to lead normal lives and to fulfill their potential. The objectives include the provision of annual comprehensive evaluations, replacement therapy, and psychosocial assessments, and patient education at an accessible hemophilia center, supplemented by training and placement on a home care program allowing self-infusion of prescribed blood products.The goals of the AIDS risk reduction program are to reduce the spread of infection and to reduce the stress of infected patients and their family members. The objectives include the provision of individual counseling, HIV testing, group discussions for education and support, and informational mailings.

Comprehensive Hemophilia Center, MCH Region IV
Bowman Gray School of Medicine
300 South Hawthorne Road
Winston-Salem, NC 27103
(919) 748-4324

Hemophilia
MCJ-372002
10/01/86-09/30/90
Project Director:
Christine A. Johnson, M.D.

MCH Region IV has 24 individual comprehensive hemophilia programs in North Carolina, South Carolina, Georgia, Florida, Tennessee, Kentucky, Mississippi, and Louisiana. These programs provide comprehensive hemophilia care, and HIV testing, education, and counseling for individuals with hemophilia and their families. Seven of the States in the region have designated State hemophilia programs, which provide additional funding for hemophilia care.

Comprehensive Hemophilia Diagnostic and Treatment Center
University of North Carolina at Chapel Hill
CB #7015
433 Burnett/Womack Clinical Sciences Building
Chapel Hill, NC 27599-7015
(919) 966-4736

Hemophilia
MCJ-372005
10/01/86–09/30/90
Project Director:
Campbell W. McMillan, M.D.

This project is designed to meet the following major needs: (1) Identification and enrollment of all persons with hemophilia in our catchment area (the central and eastern sections of North Carolina); (2) promotion of an optimal quality of life for all enrolled persons through multidisciplinary, comprehensive health care with an emphasis on instituting home therapy; (3) identification of all persons with hemophilia with respect to infection with HIV, including the stage of such infection (if present), associated stress, and risks of transmitting the infection to others; and (4) participation with other medical centers in the development and distribution of comprehensive health care and HIV control throughout the nine Southeastern States constituting Maternal and Child Health Region IV.

Assessment of Hemophilia Treatment Center Services
University of Oklahoma Health Sciences Center
Department of Pediatrics
P.O. Box 26901
Oklahoma City, OK 73190
(405) 271-4415

Pediatric AIDS
BRH-PB0606
08/01/89–07/31/90
Project Director:
Roberta A. Olson, Ph.D.

The primary goal of this project is to gather data to determine the feasibility of integrating the comprehensive care services provided by hemophilia treatment centers (HTCs) to children with HIV infection with the services of other HIV-related health care agencies. The three major objectives of this project are to: (1) Define which pediatric patients are followed by HTCs, define the services that are provided to those patients, and determine what types of collaboration exist between HTCs and community agencies that provide services for HIV-infected children; (2) develop a process description of the structure and function of the HTCs' HIV treatment protocols/plans; and (3) determine the future plans of the HTCs for the treatment of HIV-infected children and their family members.

Oklahoma Comprehensive Hemophilia Diagnostic and Treatment Center
University of Oklahoma Health Sciences Center
College of Medicine
Department of Pediatrics
P.O. Box 26307
Oklahoma City, OK 73126
(405) 271-3661

Hemophilia
MCJ-402002
10/01/87–09/30/90
Project Director:
Charles L. Sexauer, M.D.

The Oklahoma Hemophilia Diagnostic and Treatment Center (OHTC) is located in Federal Region VI, which includes Texas, Oklahoma, and Arkansas. The geographic and functional area served is the State of Oklahoma, with a population of 3.3 million. OHTC is the only center in the State which provides comprehensive hemophilia care.

Comprehensive Hemophilia Diagnostic and Treatment Center
Oregon Health Sciences University
Crippled Children's Division
P.O. Box 574
Portland, OR 97207
(503) 255-8716

Hemophilia
MCJ-412002
10/01/87–09/30/90
Project Director:
Everett W. Lovrien, M.D.

The purpose of this project is to maintain a hemophilia program which will provide regionalized comprehensive care for hemophilia patients in Oregon, Washington, Alaska, and Idaho. The goals are to identify persons with hemophilia, describe their health problems, and develop a health care plan for each patient. Included in the goals are assessments of the medical, psychological, vocational, demographic, financial, social, and family impact of hemophilia.

Comprehensive Hemophilia Diagnostic and Treatment Center
Pennsylvania State University College of Medicine
Division of Hematology
Milton S. Hershey Medical Center
P.O. Box 850
Hershey, PA 17033
(717) 531-8399

Hemophilia
MCJ-422004
10/01/85–09/30/90
Project Director:
M. Elaine Eyster, M.D.

The Comprehensive Care Program for Hemophiliacs focuses on: (1) Maintenance of psychosocial programs; (2) coordination and development of AIDS education/risk and family stress reduction counseling programs; and (3) promotion and integration of research activities which include NIH-funded spouse studies and clinical trials, both of which are essential for the development of effective programs for HIV prevention and therapy.

Curriculum Development for Training Family Service Providers to Work with Families which Include HIV-Infected Children
Thomas Jefferson University
College of Allied Health Sciences
130 South Ninth Street, Suite 820
Philadelphia, PA 19107
(215) 928-8011

Pediatric AIDS
BRH-PB0305
08/01/89–07/31/90
Project Director:
Elizabeth DePoy, M.S.W., Ph.D.

To meet the needs of HIV-infected children and their support systems in a culturally relevant and economically feasible manner, a community-based network of family service providers has been conceptualized. This network can only be created and maintained if the providers are trained, supervised, and assisted in their difficult jobs. This project seeks to develop, pilot-test, evaluate, and disseminate a model curriculum to educate trainers who will train family service providers.

Regional Hemophilia Diagnostic and Treatment Center
Jefferson Medical College
Cardeza Foundation for Hematologic Research
11th and Walnut Streets, Suite 249
Philadelphia, PA 19107
(215) 928-7786

Hemophilia
MCJ-422005
10/01/85–09/30/90
Project Director:
Sandor S. Shapiro, M.D.

The major goals of this project are to: (1) Provide comprehensive medical and psychosocial services at the Cardeza Foundation Hemophilia Center to patients with hereditary hemorrhagic disorders, support the organization of our satellite centers, and collaborate with satellite center staff in providing this care; (2) provide AIDS surveillance in our patient population, including close followup of patients with AIDS, ARC, and other clinical abnormalities, as well as periodic HIV testing. In addition, our goal is to engage in cooperative studies with other laboratories and centers in an effort to better delineate the epidemiology of HIV in patients treated for congenital hemorrhagic disorders; and (3) develop and implement, along with other regional centers, an aggressive AIDS risk reduction program for hemophilia patients, their families, and sexual partners, as well as educational programs for health care providers in the region.

Puerto Rico Pediatric AIDS Demonstration Project
Puerto Rico Department of Health
Box 70184
San Juan, PR 00936
(809) 754-9576

Pediatric AIDS
BRH-P02044
08/01/88–07/31/91
Project Director:
Nancy Santiago, M.D.

The project objectives are to establish a multidisciplinary team to: (1) Prevent HIV transmission through outreach and culturally sensitive education; (2) provide case management to promote improved use of existing services and tracking of cases; (3) provide attendant services, transportation, and respite care to families to promote family unity and care of HIV-infected children; and (4) strengthen the professional support services in treatment sites.

FACTS, Family AIDS Center for Treatment and Support
Rhode Island Department of Health
75 Davis Street
Providence, RI 02905
(401) 277-2312

Pediatric AIDS
BRH-P01012
08/01/88–07/31/91
Project Director:
Peter Simon, M.D., M.P.H.

The FACTS project provides residential, in-home, and community-based care for HIV-infected children and their families. FACTS is an independent nonprofit agency chartered by the state of Rhode Island under the administrative auspices of the Rhode Island Department of Health. FACTS has formal, reciprocal working relationships with 49 community organizations to provide outreach, education, training, referral, and health and support services.

Dallas-Fort Worth Area Pediatric AIDS Health Care Demonstration Project —Open Arms/University of Texas Southwestern Collaborative Model Program
Open Arms and the University of Texas
Southwestern Medical Center
5523 Harry Hines Boulevard
Dallas, TX 75235
(214) 590-2329 or 559-3946

Pediatric AIDS
BRH-P06048
08/01/89–07/31/90
Project Directors:
Janet Squires, M.D.
Chaplain Stefanie Held

The goals of this project are to: (1) Provide a family-oriented, coordinated, model program of community-based services to meet the medical, psychological, developmental, educational, basic human rights, and family unity and support needs of HIV-infected infants, children, and youth; (2) coordinate a community-based model program of case-managed support for HIV-infected women, aimed at prevention of perinatal HIV transmission; and (3) facilitate communication about educational service availability through a community-based network of agencies and groups that deliver preventive educational services to populations of youth especially at risk for contracting HIV infection.

Development of an Educational Program to Train Volunteers and Foster Families to Work with HIV-Positive Children
Baylor College of Medicine
Department of Pediatrics
1 Baylor Plaza
Houston, TX 77030
(713) 798-1905

Pediatric AIDS
BRH-PB0601
08/01/89–07/31/91
Project Director:
Mariam R. Chacko, M.D.

The purpose of this project is to develop a recruitment and training program to improve the knowledge and skills of volunteers and foster parents caring tor families with HIV-positive children. The training will prepare the volunteers and foster families to provide appropriate support services, such as respite care, assistance with access to health care, support for activities of daily living, and long- and short-term foster care.

Gulf States Hemophilia Diagnostic and Treatment Center
University of Texas Health Science Center at Houston
University of Texas Medical School
P.O. Box 20780
Houston, TX 77225
(713) 792-5371

Hemophilia
MCJ-482004
10/01/87–09/30/90
Project Director:
W. Keith Hoots, M.D.

The programmatic goals of the Gulf States Hemophilia Center are to: (1) Provide all appropriate facets of clinical care, including expertise in hematology, genetics, dentistry, orthopedics, and the management of complications of infection with the hepatitis or human immunodeficiency viruses; (2) educate every hemophilia patient who is infected with HIV or at risk for infection about the means for eliminating/alleviating the risk of spreading this lethal virus; and (3) foster implementation of regional strategies for improving hemophilia care and HIV risk reduction activities.

North Texas Comprehensive Hemophilia Center
University of Texas Health Science Center at Dallas
5323 Harry Hines Boulevard
Dallas, TX 75235
(214) 688-3388

Hemophilia
MCJ-482003
10/01/84–09/30/90
Project Director:
George Buchanan, M.D.

The North Texas Comprehensive Hemophilia Center was established in 1983 for the purpose of offering comprehensive diagnostic and treatment services to those children and adults with congenital blood coagulation disorders who reside in North Texas. The continued activities of the center will seek to address the multifaceted problems associated with hemophilia and its most serious complication, HIV infection. These problems will be approached through a closely linked array of clinical, educational, and research efforts carried out by skilled health care professionals who will deal with both pediatric and adult patients. Special efforts will be made to reach the underserved adult patient population.

South Texas Children's AIDS Center
University of Texas Health Science Center at San Antonio
7703 Floyd Curl Drive
San Antonio, TX 78284-7802
(512) 567-5215

Pediatric AIDS
BRH-P06009
08/01/88–07/31/91
Project Director:
John A. Mangos, M.D.

The South Texas Children's AIDS Center was created by the University of Texas Health Science Center in San Antonio, which has considerable experience in caring for HIV-infected children with hemophilia. The center has begun to build a network of health care delivery to identify and educate women and youth at risk for HIV infection, and to provide comprehensive medical care to HIV-infected families.

South Texas Comprehensive Hemophilia Treatment Center
University of Texas Health Science Center at San Antonio
Department of Pediatrics
7703 Floyd Curl Drive
San Antonio, TX 78284
(512) 691-5265

Hemophilia
MCJ-482001
10/01/87–09/30/90
Project Director:
Richard T. Parmley, M.D.

The overriding goals of the regional hemophilia program are to: (1) Maximize the quality of life for patients with hemophilia and other congenital coagulopathies; and (2) prevent the spread of HIV infection through patient and community education, while providing psychosocial support for dealing with the stress of this infection. To accomplish these goals, project objectives have been established in the areas of outpatient care, home care therapy and instruction programs, community awareness, counseling for adolescents regarding HIV infection, mechanisms for outreach to nearby communities, and coordination of center efforts with other programs addressing similar concerns.

Seattle-King County Pediatric AIDS Demonstration Project
Seattle-King County Department of Public Health
110 Prefontaine Place, South, #500
Seattle, WA 98104
(206) 296-4677

Pediatric AIDS
BRH-P10025
08/01/88–07/31/91
Project Director:
Kathy Carson

The Seattle/King County Department of Public Health oversees this project to develop a coordinated system of comprehensive care to two groups—street youth and school dropouts engaged in high-risk intravenous drug use and/or sexual activities; and at-risk and HIV-positive women, infants, and children requiring medical/social case management services. The project builds upon existing resources with the intent of expanding the capacity to deliver services in collaboration with local agencies with specific expertise with these targeted groups. Collaboration and coordination exists through a multiagency planning committee with representatives from State and local health and social services; tertiary care facilities; educational institutions, and community-based organizations.

Region V-West Hemophilia Treatment Center Network and AIDS Risk Reduction Network
Great Lakes Hemophilia Foundation, Inc.
1725 West Wisconsin Avenue
Milwaukee, WI 53233
(414) 344-0772

Hemophilia
MCJ-552002
10/01/86–09/30/90
Project Director:
Janice R. Hand, R.N.

The goals and objectives of this project are: (1) Maintenance of a regional network of hemophilia treatment centers which provide comparable, comprehensive care to patients and their families; (2) provision of multidisciplinary hemophilia treatment services which include, but are not limited to, diagnosis, home therapy certification and oversight, genetic counseling, psychosocial counseling, medical/financial counseling, and other forms of professional support as needed; (3) community outreach to encourage all hemophilia patients and health care providers to participate in the program; (4) reduction of the risk of transmission of the AIDS virus within the hemophilia community through intensive education and counseling; development of specialized educational approaches for preteen and adolescent patients; and provision of professional educational opportunities for center staff, other professionals, and the general community; and (5) supporting families in coping with AIDS and its impact on their lives in order to reinforce compliance with CDC guidelines regarding safer sex, appropriate infusion techniques, and the like.

Adolescent Health

Primary Care/
Preventive Health Services

Better Health for Rural Teens (Lakeview Project)
Arkansas Department of Health
4815 West Markham Street
Little Rock, AR 72205-3867
(501) 633-6812

MCHIP
MCJ-053001
10/01/88–09/30/91
Project Director:
Louise Dennis

The goals of this project are to: (1) Develop a community-based model to address adolescent health needs, and (2) improve the health of Lakeview youth ages 10–19. Four health status improvement objectives have been outlined, based on a preliminary survey of Lakeview youth. These objectives are to: (1) Reduce the number of youth who engage in unprotected intercourse; (2) decrease the number of youth who seldom or never wear seat belts; (3) reduce the number of youth who skip breakfast; and (4) decrease the number of youth who skip dinner. Approaches to service delivery will include a weekly teen clinic, comprehensive health education, and an after-school teen program to promote physical fitness and positive lifestyles.

Youth Enrichment Support Services Project in a School-Based Setting
San Francisco Department of Public Health
Family Health Bureau
101 Grove Street, Room 115B
San Francisco, CA 94102
(415) 554-2563

MCHIP
MCJ-063000
10/01/88–09/30/91
Project Director:
Geraldine Oliva, M.D., M.P.H.

Balboa High School is an environment where the youth, 95 percent of whom are from minority groups, typically engage in a constellation of high-risk behaviors such as substance abuse, gang activity, drunk driving, and unsafe sex. The three goals of this project are to: (1) Provide a structure of services which will enable low-functioning adolescents to overcome environmental barriers so that they can successfully negotiate their way to productive adult lives; (2) further elucidate and mitigate the contributing factors which lead to high-risk behaviors; and (3) create a positive environment which will support the positive changes in behavior made by adolescents enrolled in the project.

Partners in Action for Teen Health
Colorado Department of Health
4210 East 11th Avenue
Denver, CO 80220
(303) 331-8360 or 331-8372

MCHIP
MCJ-083296
10/01/87–09/30/90
Project Directors:
Daniel J. Gossert, M.A., M.P.H.
Barbara Schricker Ritchen, R.N., M.A.

This project seeks to prevent and/or reduce the nine health problems found among Colorado adolescents ages 10 through 19 that were identified in 1986 by the Colorado Department of Health and the Advisory Council on Adolescent Health. Efforts include the development of a model community service system, the collection and analysis of county-specific adolescent health information, and the development of a mechanism for replicating and disseminating the model throughout Colorado, Region VIII, and the United States.

Maternal and Child Health Adolescent Network
Hawaii Department of Health
Maternal and Child Health Branch
741-A Sunset Avenue
Honolulu, HI 96816
(808) 735-3056

MCHIP
MCJ-153422
10/01/87-09/30/90
Project Director:
Lisa A. Simpson, M.D., M.P.H.

This project will develop a health network to improve the health status of youth ages 10 to 19 years. By the end of the grant period, a permanent unit for adolescent health within the Hawaii Department of Health will be established, a system to coordinate adolescent health services at the State level will be developed, and case management systems will be operating in three counties. The quality and quantity of data on adolescent health will be improved by gathering baseline data and setting minimum reporting requirements for other information.

Program to Improve the Social/Emotional Functioning of Adolescents with Physical Handicaps
University of Illinois at Chicago
College of Medicine
Center for Craniofacial Anomalies
Department of Pediatrics
P.O. Box 6998—M/C 588
Chicago, IL 60680
(312) 996-7546

MCHIP
MCJ-173103
10/01/87-09/30/91
Project Director:
Kathleen Kapp-Simon, Ph.D.

The goal of this program is to improve the social and emotional functioning of adolescents with physical handicaps. Particular emphasis will be placed on decreasing social inhibitions and increasing positive attitudes about appearance, self-awareness, empathetic communication, and the ability to be appropriately assertive in a social situation. These skills will help the youth adapt to their physical handicaps and the stresses of adolescence in order to enhance their desire to go to school, to work, and ultimately, to live independently. Parents will be taught how to reinforce the skills.

Predicting Teenage Pregnancy
Wayne State University
Merrill-Palmer Institute
Detroit, MI 48202

Research
MCJ-260585
10/01/89-09/30/92
Project Directors:
Joel W. Ager, Ph.D.
Jeanette Poindexter, Ph.D.
Eli Saltz, Ph.D.

To develop preventive intervention strategies to address the serious social problem of teenage pregnancy in the United States, it is important that its antecedents be understood and that those adolescents at risk for early childbearing be identified. There is a great deal of research on the correlates of teen pregnancy, but the conclusions that can be drawn are limited because of methodological shortcomings. The proposed research specifies an explanatory model of teen pregnancy risk. Six hypothesized profiles, based upon the model, will be tested. A comprehensive assessment of demographic, social, and psychological variables shown in past research to be associated with teen pregnancy will be conducted.

Pilot Project for the Establishment of a Health Services System for Llorens Torres High-Risk Youth
Municipality of San Juan
P.O. Box 21405
Rio Piedras, PR 00928
(809) 763-6560

MCHIP
MCJ-723455
10/01/87–09/30/90
Project Director:
Carmen Feliciano, M.D.

The overall goal of this project is to develop strategies which improve the physical, emotional, and mental health of Llorens Torres high-risk adolescents and which can be replicated in other metropolitan areas. Activities include the development of a multiservice, community-based health services system and the establishment of a multidisciplinary health team for the screening, evaluation, and treatment of youth enrolled in the project.

Family-Focused Strategy for Reducing Premature and Unprotected Sexual Activity Among Minority Youth in School-Based Clinics
University of Texas Southwestern
Children and Youth Project
6263 Harry Hines Boulevard, Suite 401
Dallas, TX 75235-9083
(214) 630-4781

MCHIP
MCJ-488610
10/01/89–09/30/94
Project Director:
R. Stephen Rosser, Ph.D.

This project aims to reduce the occurrence of premature and unprotected sexual intercourse among a group of 200 African American and 200 Hispanic 10-year-olds recruited from 2 school-based clinics. All of the participants will receive annual health maintenance evaluations during the 5-year program. One-half of the project participants will receive educational counseling and intervention services provided by nurses and social workers. These services are designed to enhance parent-child communication, increase parental knowledge of child development and sexuality, and develop problem-solving and decision-making skills among teens. Health status indicators and behavioral/cognitive measures will be collected and assessed throughout the project period to evaluate the success of specific intervention approaches.

Adolescent Health

Violence/Injury Prevention

Risk-Taking Behavior in Adolescents: Impact of Puberty
University of California at San Francisco
School of Medicine
Third and Parnassus Avenues
San Francisco, CA 94143
(415) 476-2184

Research
MCJ-060564
12/01/87–11/30/90
Project Director:
Charles E. Irwin, Jr., M.D.

The objective of this research is to examine the relationship between the timing of physiological development in adolescence and three risk-taking behaviors: Sexual activity, substance use, and accident-related behavior. The underlying hypothesis is that the timing of physiological maturation predisposes adolescents to engage in certain risk-taking behaviors which fulfill critical developmental needs (both psychosocial and psychological) during the second decade of life. Specific psychosocial changes occur along with biological maturation and are associated with adolescent risk-taking behaviors.

Youth Violence Prevention Project
Contra Costa County Health Services Department
Prevention Program
75 Santa Barbara Road, Second Floor
Pleasant Hill, CA 94523
(415) 646-6511

MCHIP
MCJ-063220
10/01/87–09/30/90
Project Directors:
Larry Cohen
Nancy Baer, M.S.W.

The major goals of this project are to: (1) Reduce the incidence of suicide, assault and homicide, and dating violence; and (2) improve the coordination of violence prevention services in order to ensure the adoption of multifaceted prevention strategies over single focus interventions. The project serves adolescents in three communities. The central concept involved in reaching these goals is that the community must become involved in prevention activities at several concurrent levels in order to effect positive change.

Health Promotion Project for Urban Youth—Violence Prevention Project
Trustees of Health and Hospitals of the City of Boston, Inc.
725 Massachusetts Avenue
Boston, MA 02118
(617) 424-5196

MCHIP
MCJ-253420
10/01/87–09/30/90
Project Director:
Alice J. Hausman, Ph.D., M.P.H.

This project seeks to reduce the incidence of negative health outcomes of violence by making the clinical setting more responsive to the needs of youth at risk for, or engaged in, violent behavior. The project also seeks to link primary and secondary prevention services in order to generate a comprehensive approach to the problem.

Adolescent Health

Youth in Transition

Development of a Prevocational Training Center
Children's Hospital National Medical Center
111 Michigan Avenue, N.W.
Washington, DC 20010
(202) 745-3203

MCHIP
MCJ-115011
07/01/88–06/30/90
Project Director:
Patience H. White, M.D.

The goals of this project are to determine if early vocational guidance can improve vocational readiness in adolescents with rheumatic disease and to expand the project to encompass children with chronic illnesses. The program includes prevocational assessment and counseling; an employment resource guide; outreach to children, families, and employers in the region; and a computerized data base with prevocational data.

National Center for Youth with Disabilities
University of Minnesota
Adolescent Health Program
Box 721 UMHC
Harvard Street at East River Road
Minneapolis, MN 55455
(612) 626-2825

MCHIP
MCJ-275045
10/01/89–06/30/94
Project Director:
Robert W. Blum, M.D., M.P.H., Ph.D.

The National Center for Youth with Disabilities (NCYD) is a technical assistance and resource center whose goal is to improve the health and social functioning of youth with disabilities by providing consultation and disseminating information to those who plan and deliver services and by increasing coordination between the health care system and other service providers. In order to meet its goal, NCYD will maintain the National Resource Library, provide assistance directly or through the Technical Assistance Network, distribute a quarterly newsletter, and conduct national and regional meetings for parents and professionals.

Implementation and Evaluation of Psychosocial Services for Adolescents with Genetic Diseases
New York State Department of Health
Bureau of Child and Adolescent Health
Empire State Plaza
Corning Tower, Room 780
Albany, NY 12237-0618
(518) 474-2749

Genetics
MCJ-361005
10/01/84–09/30/90
Project Director:
Barry R. Sherman, Ph.D.

This project aims to develop a model support program for the coordination and integration of psychosocial support services in order to meet the special needs of genetically affected adolescents and their families. An interdisciplinary team approach to care coordination and management will be used, emphasizing individual, family, and community resources for a more comprehensive and holistic response to the needs of these adolescents and their families.

Young Adults in State Health Care Programs
Albert Einstein College of Medicine
1300 Morris Park Avenue
Bronx, NY 10461

Research
MCJ-360578
10/01/89-09/30/91
Project Director:
Henry T. Ireys, Ph.D.

State Programs for Children with Special Health Care Needs have begun to recognize and address the pervasive difficulties that face chronically ill and handicapped older adolescents and young adults as they are discharged from these programs. Difficulties include problems in finding medical and related services responsive to their needs, inadequate financial coverage of needed services, psychological distress, and disincentives for vocational training or employment. At the present time, State programs lack the information needed for planning or developing services that would assist this population in their transition to adulthood. The general goal of this study is to help repair this deficit of knowledge through a survey of 1,000 adolescents and young adults who use these programs.

Networking Services for Adolescents with Sickle Cell Disease: An Interdisciplinary Demonstration Project
Sickle Cell Disease Research Foundation of Texas, Inc.
2626 South Loop West, Suite 245
Houston, TX 77054
(713) 666-0300

Genetics
MCJ-481003
10/01/87-09/30/90
Project Director:
Pearlie Fennell, Ph.D.

This project will develop a network of coordinated psychosocial community services designed to address the unmet psychosocial needs of adolescents with sickle cell disease and to assist these individuals in preparation for a productive adulthood. The program will focus on enhancing the self-concept and self-esteem of the adolescents enrolled in the program.

Family Autonomy Project
University of Virginia
Kluge Children's Rehabilitation Center
2270 Ivy Road
Charlottesville, VA 22901
(804) 924-2345

MCHIP
MCJ-515019
10/01/87-09/30/90
Project Director:
Sharon L. Hostler, M.D.

The goal of this project is to ensure the successful transition to adulthood of adolescents with physical disabilities or chronic illnesses by means of interventions with families, the health care team, and the adolescents themselves. The project seeks to encourage the involvement of families in planning for the health care of their children, to modify staff behaviors and institutional practices to promote family autonomy, and to broaden treatment goals so that they include health maintenance and future planning for adolescents with special needs.

University of Washington Adolescent/Young Adult Transition Program
University of Washington
Division of Adolescent Medicine
CDMRC, WJ-10
Seattle, WA 98195
(206) 545-1273

MCHIP
MCJ-535032
10/01/88-09/30/91
Project Director:
James A. Farrow, M.D.

The Adolescent Transition Program addresses the needs of older adolescents with special health care needs who wish to make the transition from pediatric to adult health care. An interdisciplinary team assesses patients for transition readiness and provides patient teaching as well as the identification of appropriate providers in the adult care sector. Other objectives include a comparison of costs of health care in the pediatric and adult sectors, inservice training on the needs of this population, and community dissemination of a transition model.

General Program Concerns

State Staff Development

Continuing Education in Maternal and Child Health
San Diego State University
6303 Alvarado Court, Suite 207
San Diego, CA 92120
(619) 594-4667

Training
MCJ-009079
10/01/89-09/30/94
Project Director:
Allan C. Oglesby, M.D.

The purpose of this project is to offer a national program of continuing education to improve administrative and leadership skills for key management staff in State Title V programs. Two levels of institutes will be offered. An introductory institute applicable to staff members from all State Title V programs will be developed. An advanced level MCH institute will be offered for staff from State MCH Programs only. Institutes will be offered four times annually in varying sites. The curriculum and format will be based on the experience of the past four years in the successful development of MCH institutes.

Kentucky Outreach Project for Handicapped Children's Services
Kentucky Commission for Handicapped Children
982 Eastern Parkway
Louisville, KY 40217

MCHIP
MCJ-213801
10/01/88-09/30/90
Project Director:
Susan Foushee

The Kentucky Commission for Handicapped Children (KCHC) is a State Government health care program that provides diagnostic evaluations, medical followup, prosthetic devices, and rehabilitative therapy for eligible children and youth under the age of 21. KCHC provides care, management, screening, and/or referral services for approximately 45,000 children annually. An additional 39,000 physically handicapped children and youth are in need of services, however. The Kentucky Outreach Project is designed to provide the necessary marketing and outreach services to enable KCHC to promote a greater statewide awareness of its programs and activities; specifically, through dissemination of training, information, and education services.

Missouri MCH Staff Development Grant
Missouri Department of Health
Division of Maternal, Child and Family Health
1730 East Elm
P.O. Box 570
Jefferson City, MO 65102
(314) 751-6174

MCHIP
MCJ-293720
10/01/88-03/31/90
Project Director:
Larry Jones

This project will help develop an evaluation program and train staff to be able to conduct evaluations. Professional consultants will be hired to develop a resource allocation plan and an evaluation mechanism for the MCH Block Grant so that State staff can evaluate existing programs to determine funding needs and existing program effectiveness.

Montana MCH Staff Development Grant
Montana Department of Health and Environmental Sciences
Family/MCH Bureau
Cogswell Building
Helena, MT 59620
(406) 444-4740

MCHIP
MCJ-303304
10/01/88-06/30/90
Project Director:
Sidney C. Pratt, M.D.

This project addresses the lack of a comprehensive, current statement of objectives for maternal and child health in Montana by facilitating the establishment of a process for planning which goes beyond a single document. This process will allow periodic revision, encourage extension of the objectives into direct service planning, serve as an impetus for designing data systems, and provide a tool for presenting budget requests. The Montana MCH Program will hire a public health coordinator to work with State MCH staff, key local health departments and hospitals, and others to develop meaningful goals and objectives, determine MCH needs, and plan generally and specifically to meet these needs.

Children with Special Health Care Needs Continuing Education Institutes
Columbus Children's Hospital
700 Children's Drive
Columbus, OH 43205
(614) 461-2352

MCHIP
MCJ-395046
07/01/89-06/30/94
Project Director:
Antoinette P. Eaton, M.D.

The purpose of this institute is to maintain and strengthen leadership capabilities for medical, nursing, and administrative personnel in programs providing services to children with special health care needs. One institute and one topical seminar are given each year. The institute offers orientation for new staff concerning the history, organization, funding, purposes, and functions of CSHCN programs. The topical seminar attracts senior CSHCN program officers who discuss current issues, develop problem-solving strategies, and forecast future trends in health care services for children with special health care needs.

State Program and Staff Development to Improve Nutrition Services for School-Age Children with Handicapping Conditions
Virginia Department of Health
Children's Specialty Services
109 Governor Street, Sixth Floor
Richmond, VA 23219
(804) 786-3691

MCHIP
MCJ-513305
10/01/88-06/30/90
Project Directors:
Willard R. Ferguson, M.D.
Janet W. Horsley, M.P.H., R.D.

This project provides an interagency approach to program and staff development between the Virginia Department of Health and Virginia Department of Education to develop nutrition services for handicapped children, ages 2–21, who are enrolled in public schools. The purpose of the project is to : (1) Increase the awareness and knowledge of nutritionists, school staff, and families about the nutritional needs of chronically ill children; (2) create networks among families of handicapped children, school systems, and community nutrition resources; and (3) initiate ongoing nutrition programs for school-age handicapped children.

General Program Concerns

MCH/Public Health Professional Development

Adolescent Health Training
University of Alabama at Birmingham
School of Medicine
Department of Pediatrics
University Station—CHT 157
Birmingham, AL 35294
(205) 934-5262

Training
MCJ-000979
10/01/77-06/30/92
Project Director:
Ronald A. Feinstein, M.D.

The goal of the Adolescent Health Training Project is to train health professionals from multiple disciplines to be prepared to take leadership positions as advocates for adolescents. This is accomplished through interdisciplinary didactic and experiential training. Areas of emphasis include service, research, education, and administration. All trainees are involved in activities aimed at providing them with the skills necessary to understand and be able to impact on the health-related challenges facing adolescents.

Maternal and Child Health Development Program
University of Alabama at Birmingham
School of Public Health
Tidwell Hall, Room 231
Birmingham, AL 35294
(205) 934-7161

Training
MCJ-009040
10/01/89-06/30/94
Project Director:
Robert Goldenberg, M.D.

The purpose of this program is to train professionals in MCH. The primary targets of this training are nurses, physicians, social workers, and nutritionists who will obtain the M.P.H. degree. We will train a far larger group of professionals, however, through continuing education, technical assistance projects, relationships with other institutions, and interaction with the student population of the University of Alabama's other Title V training programs. With a faculty with expertise in obstetrics, pediatrics, pediatric and maternity nursing, social work, nutrition, and psychology, and with additional support in demography, epidemiology, biostatistics, and health administration, the project has the resources to provide training, continuing education, technical assistance, advocacy, and significant research related to the provision of MCH services.

Behavioral Pediatrics Training Program
Children's Hospital of Los Angeles
4650 Sunset Boulevard, Box 76
Los Angeles, CA 90027
(213) 669-4552

Training
MCJ-009091
10/01/86-06/30/91
Project Director:
Barbara M. Korsch, M.D.

This program provides training in behavioral, developmental, and psychosocial aspects of pediatrics for faculty, fellows, residents, medical students, and associated health professionals. The program, developed to foster optimal doctor-patient relationships, communication skills, and receptiveness to learning about psychosocial issues, is strengthened through collaboration with the University Affiliated Program, community agencies and schools, and key programs within the Children's Hospital of Los Angeles. The 3-year fellowship in behavioral pediatrics is designed to prepare future specialized faculty in behavioral pediatrics with the appropriate knowledge and skills for practice, teaching, and research.

Interdisciplinary Adolescent Health Training Project
University of California at San Francisco
Division of Adolescent Medicine
400 Parnassus Avenue
Room AC-1, Box 0314
San Francisco, CA 94143
(415) 476-2184

Training
MCJ-000978
10/01/87-06/30/92
Project Director:
Charles E. Irwin, Jr., M.D.

The overall purpose of this project is to train individuals in five health care disciplines including medicine, nursing, nutrition, psychology, and social work to become health care leaders prepared to meet the challenges of adolescent health in the 21st century. The project emphasizes leadership development in clinical adolescent health; teaching, research, health policy, and health administration through direct clinical service; didactic course work and seminars; development and implementation of research projects; participation with faculty in curriculum development, grant development, and ongoing faculty research projects; and participation of trainees with faculty in consultation and technical assistance at the local community, State/regional, and national levels.

Maternal and Child Health Development Training
San Diego State University
6330 Alvarado Court, Suite 207
San Diego, CA 92120
(619) 594-4667

Training
MCJ-009044
10/01/89-06/30/94
Project Director:
Allan C. Oglesby, M.D.

The mission of this program is the education and training of public health professionals for leadership in improving the health status of mothers and children, the provision of technical assistance and professional consultation to MCH service programs, and the development and dissemination of new knowledge in MCH and advocacy for mothers and children. The program offers an M.P.H. degree in maternal and child health. Core faculty represent pediatrics, obstetrics, nursing, social work, nutrition, and health planning and evaluation.

Occupational Therapy Leadership Program Training Model
University of Southern California
Department of Occupational Therapy
2250 Alcazar, CSA 203
Los Angeles, CA 90033
(213) 224-5494

Training
MCJ-004048
07/01/84-06/30/92
Project Director:
Florence A. Clark, Ph.D., O.T.R.

The purpose of this project is to train leaders in occupational therapy at the master's and doctoral levels. As part of this enterprise, a new Ph.D. program in occupational science was established. Occupational science, which has as its focus the systematic study of occupations, is conceived of as a basic science that can nurture occupational therapy. A further goal is to produce and disseminate research in occupational science as part of the training project and to rely upon the unique training opportunities available at the University of Southern California-University Affiliated Project to enhance the leadership skill of the trainees. This program is designed to meet the need for pediatric leaders and faculty in occupational therapy nationwide.

Training in Maternal and Child Health Care
University of California at Berkeley
M-11 Wheeler Hall
Berkeley, CA 94720
(415) 642-1512

Training
MCJ-000103
07/01/89-06/30/94
Project Director:
Frank Falkner

The continuing purpose of this program is to prepare professionals for leadership roles in public health programs for mothers and children, and to provide other students in the School of Public Health with information about the field of maternal and child health practice. The history of the MCH training project indicates that the training program was developed in 1946 in response to the early development and expansion of community services for mothers and children. In 1962, this program was expanded to meet the increased need for training professional health personnel for leadership positions. In addition to serving students from a geographic area covering California, Nevada, and Oregon, this program has received students from many other States and territories, thereby providing a regional and national resource for leadership training.

Behavioral Pediatrics Training
Yale University School of Medicine
Department of Pediatrics
333 Cedar Street
New Haven, CT 06510-8064
(203) 785-2468

Training
MCJ-009087
09/01/86-06/30/91
Project Director:
John Leventhal, M.D.

The purpose of this project is to train pediatricians to become leaders in the practice of "new pediatrics"—a practice wherein pediatricians incorporate into their existing base of diagnostic and treatment skills in organic pediatric disease the ability to work with issues in development, behavior, community child care agencies, and child care policy.

Biopsychosocial Knowledge and Skills for Pediatric Practice
University of Connecticut Health Center
Department of Psychiatry
263 Farmington Avenue
Farmington, CT 06032
(203) 241-6891

Training
MCJ-009136
10/01/89-09/30/93
Project Director:
Kenneth S. Robson, M.D.

This collaborative office rounds (COR) program provides an opportunity for enhancing practical knowledge and skills in the office management of pediatric/psychiatric problems such as depression/suicide, divorce, school phobias, attention disorders, and the like. This program is designed to address regional continuing education needs and is sponsored jointly by the Department of Pediatrics and the Division of Child and Adolescent Psychiatry. The primary goal of this project involves a combination of didactic and case-oriented teaching strategies to increase biopsychosocial knowledge and skills in practicing pediatricians.

COR Group in Psychosocial and Developmental Pediatrics
Yale University
Yale Child Study Center
230 Frontage Road
New Haven, CT 06510
(203) 785-4221

Training
MCJ-009133
10/01/89-09/30/93
Project Director:
Richard H. Granger, M.D.

This program is designed to enhance the practice performance and satisfaction of mature, primary care pediatricians by adding to their knowledge and skills in the psychosocial/developmental aspects of pediatrics through a weekly seminar in which they can discuss problem cases from their own practices. The primary teaching mode will be around the practical issues of process and management of the real cases the pediatricians bring in for consultation.

Training Nurse Midwives
Georgetown University
School of Nursing
37th and O Street, N.W.
Washington, DC 20057
(202) 687-5041

Training
MCJ-009032
07/01/88-06/30/93
Project Director:
Judith S. Melson, C.N.M.

In order to reduce the shortage of certified nurse-midwives in the United States, Georgetown University offers a master's degree program in nurse-midwifery to produce nurse-midwives who will be able to provide leadership in Title V maternal and child health programs and similar programs. Students obtain clinical experience in exemplary services in the Washington, D.C. metropolitan area and nationwide for the final practicum. A newly developed course in public health offers students a view of historic and current developments in MCH programs and health policy related to perinatal care at the local, State, and Federal levels.

Maternal and Child Health Training Program
University of South Florida
College of Public Health
Department of Community and Family Health
13301 Bruce B. Downs Boulevard
Tampa, FL 33612-3899
(813) 974-4867

Training
MCJ-009128
07/01/89-06/30/94
Project Director:
Stanley N. Graven, M.D.

The MCH Training Program seeks to improve the health of mothers, children, and families by preparing professionals in multidisciplinary, community-based approaches to address the public health care needs of Florida and the United States. The program also provides consultation and technical assistance related to program planning, advocacy, and public policy development. Research activities are directed at key State and national MCH problems, including organization and delivery of health services, cocaine and substance abuse, child abuse and neglect, infant and child development, and pregnancy outcome issues.

Nurse-Midwifery in the Public Sector
Emory University
Nell Hodgson Woodruff School of Nursing
Atlanta, GA 30322
(404) 727-6918

Training
MCJ-009115
07/01/88-06/30/93
Project Director:
Elizabeth S. Sharp, Dr.P.H.

The purpose of the project is to increase the number of certified nurse-midwives prepared to assume leadership positions in the provision of services to women and their infants in public health settings. Each year, three highly qualified applicants begin the six-semester M.N./M.P.H. dual degree program with clinical specialization in nurse-midwifery at Emory University. The specific maternal and infant health care needs in the Southeast (Region IV) are incorporated into the curriculum, and students have field placement in a public setting during the program. Mechanisms are being developed to assist the graduate in assuming a leadership position in nurse-midwifery in public health following graduation.

Maternal and Child Health Training Program
University of Hawaii
School of Public Health
1960 East-West Road
Honolulu, HI 96822
(808) 948-8832

Training
MCJ-000156
07/01/89-06/30/94
Project Director:
Gigliola Baruffi, M.D., M.P.H.

The purpose of the Maternal and Child Health Training Program is to improve the health status of mothers and children through training of health professionals for leadership, provision of technical assistance and professional consultation, development and dissemination of knowledge, and advocacy. Graduate-level instruction, continuing education and technical assistance, community service, and research are conducted by an interdisciplinary faculty and staff in the cross-cultural environment of the University of Hawaii and surrounding communities.

Collaborative Office Rounds Program
Evanston Hospital
Division of Behavioral and Developmental Pediatrics
2650 Ridge Avenue
Evanston, IL 60201
(708) 492-2758

Training
MCJ-009139
10/01/89-09/30/93
Project Director:
Peter A. Gorski, M.D.

This program strives to improve practitioners' skills in identifying and counseling children and families at risk for or experiencing behavioral concerns, improve pediatricians' skills in distinguishing preventive opportunities manageable in primary care practice from those requiring specialized interventions, strengthen interactions between pediatricians and community resources on behalf of children's psychosocial development, and prepare pediatricians for advocacy roles in support of public policy initiatives for children and families. Biweekly group meetings are developmentally and topically treated in a comprehensive manner, devoting about four sessions to each topic. Case presentations and discussions, theoretical teaching, literature review, and role playing techniques will be employed in the service of the educational goals of the program.

COR: Case-Oriented Approaches in a Large Urban Center
University of Chicago
Department of Psychiatry and Pediatrics/Division of Biological Sciences
5841 South Maryland Avenue, Box 411
Chicago, IL 60635
(312) 702-8310 or 702-6826

Training
MCJ-009137
10/01/89–09/30/93
Project Director:
Kathleen M. Kelly, M.D.

This COR group will function to increase teamwork and mutual respect among pediatricians and child psychiatrists. The focus will be on enhanced knowledge of the psychosocial aspects of pediatrics and development, better use of consultation and community resources, and increased ability to help children with chronic illnesses and adolescents who are at risk. Meetings of 10–12 pediatricians and child psychiatrists are scheduled every 2 weeks and involve a case conference format.

Educational Programs Leading to Advanced Competencies in Maternal and Child Care for Occupational Therapists
University of Illinois at Chicago
Department of Occupational Therapy
1919 West Taylor Street (M/C 811)
Chicago, IL 60612
(312) 996-6901

Training
MCJ-009191
10/01/87–06/30/91
Project Director:
Mary Lawlor, Sc.D., O.T.R./L.

This project provides educational opportunities through funded graduate study for pediatric occupational therapists, continuing education courses, and research-related technical assistance and consultation. The purpose of the project is to develop and promote advanced competencies in occupational therapists working with children and families, and to enhance collaborative research in MCH-related subjects.

Maternal and Child Health Training Program
University of Illinois at Chicago
School of Public Health
2035 West Taylor Street
Chicago, IL 60612
(312) 996-8866

Training
MCJ-009041
07/01/89–06/30/94
Project Director:
Naomi Morris, M.D., M.P.H.

The underlying purpose of this training program is to improve the health status of mothers and children through training of public health professionals for leadership positions; provision of technical assistance and professional consultation; development and dissemination of new knowledge; and advocacy. The program provides comprehensive graduate training leading to two master's level degrees (M.P.H. and M.S.) and two doctoral degrees (Dr.P.H. and Ph.D.) for MCH majors and enrichment to others. Continuing education is provided through an annual biregional conference, seminars, and courses open to individuals who are not working toward a degree.

Behavioral Pediatrics Training Program
Indiana University School of Medicine
Department of Pediatrics
702 Barnhill Drive, Room A571
Indianapolis, IN 46202
(317) 274-7819

Training
MCJ-009130
7/01/86-06/30/91
Project Director:
Morris Green, M.D.

This training program is designed to prepare academicians for teaching, research, patient care, and community service in behavioral pediatrics; to enhance the capacity of both general and subspecialty pediatricians to engage successfully in those opportunities for prevention and health promotion that are regularly available through pediatric visits in both health and illness; to provide counseling regarding child development and behavior; to promote optimal parent-child interactions; and to help children and parents adapt to and cope with anticipated and unanticipated life events and changes.

Behavioral Pediatrics Training
University of Maryland at Baltimore
School of Medicine
655 West Baltimore Street
Baltimore, MD 21201
(301) 328-6538

Training
MCJ-009093
10/01/86-06/30/91
Project Director:
Murray Kappelman, M.D.

The Behavioral Pediatrics Training program at the University of Maryland seeks to provide training in behavioral pediatrics to physicians at a number of levels of training. The primary focus is on intensive fellowship level training in behavioral pediatrics through a 3-year fellowship which includes clinical experiences in a wide range of settings (i.e., inpatient, outpatient, schools, and other community settings), opportunities for teaching and administrative experiences, seminars on clinical and research topics, and research training and experience.

Graduate Education in Adolescent Health Care
University of Maryland at Baltimore
Department of Pediatrics
Division of Adolescent Medicine
31 South Greene Street, Third Floor
Baltimore, MD 21201
(301) 328-6495

Training
MCJ-000980
07/01/82-06/30/92
Project Director:
Marianne E. Felice, M.D.

The purpose of this project is to provide continued professional training and an interdisciplinary approach to adolescent health care in the Division of Adolescent Medicine at the University of Maryland at Baltimore. The program currently trains professionals committed to careers in adolescent health care in the fields of medicine, nutrition, nursing, psychology, and social work. The overall goals of the project are to promote, develop, and deliver comprehensive, integrated health care services to adolescents by providing interdisciplinary leadership training in medicine, nursing, nutrition, psychology, and social work. The methods used include a core curriculum of didactic material, professional development with emphasis on role modeling, supervised training, and direct patient care.

Training Program in Maternal and Child Health
Johns Hopkins University
Charles and 34th Streets
Baltimore, MD 21218
(301) 955-3384

Training
MCJ-000106
07/01/89-06/30/94
Project Director:
Bernard Guyer, M.D.

In addition to its function of training students at the master's and doctoral levels and students in continuing education, this program instituted a traineeship in injury control and trauma management. The purpose of this new fellowship is to identify the components of a training program in injury control and management for children and to offer this experience to a pediatric trauma fellow. This project develops guidelines for other training programs for pediatric specialists in emergency medical services for children.

Behavioral Pediatrics Training
Trustees of Health and Hospitals of the City of Boston, Inc.
Boston City Hospital
818 Harrison Avenue
Boston, MA 02118
(617) 424-4235

Training
MCJ-009094
10/01/86-06/30/91
Project Director:
Barry Zuckerman, M.D.

There is a particular need for academic leadership in the provision of behavioral pediatric care to poor children, where the issues include not only individual family and child, but wider social systems as well. Academicians are needed to systematically evaluate clinical practices and expand the level of scientific knowledge regarding the interplay of biological, social, and psychological factors in children's well-being. New knowledge plus visible and vigorous leadership by these academicians and others should result in the improvement of pediatric care provided for all children in sickness and in health. The present project is an effort to address this need for training academic leaders in the field of behavioral pediatrics, with special emphasis on the needs of economically disadvantaged children and their parents.

Behavioral Pediatrics Training
University of Massachusetts Medical School
55 Lake Avenue North
Worcester, MA 01605
(508) 856-3028

Training
MCJ-009092
10/01/86-06/30/91
Project Director:
Jack Shonkoff, M.D.

This project is intended to further develop, refine, and implement a comprehensive, multidimensional training program in behavioral and developmental pediatrics at the fellowship, residency, and medical school levels at the University of Massachusetts Medical Center.

Maternal and Child Health Training Grant
Harvard School of Public Health
Department of Maternal and Child Health
677 Huntington Avenue
Boston, MA 02115
(617) 732-1080

Training
MCJ-000102
07/01/89-06/30/94
Project Director:
Isabelle Valadian, M.D.

This project is an academic program for experienced health professionals whose interest is the maintenance and enhancement of the health of mothers and children. The project provides fundamental skills in planning, developing, implementing, and evaluating MCH services. The curriculum focuses on factors influencing the attainment of optimal health and development, and on health-related services needed by women of childbearing age and children.

Public Health Nutritionists for MCH
Tufts University School of Nutrition
132 Curtis Street
Medford, MA 02155
(617) 956-5273

Training
MCJ-009210
10/01/88-09/30/93
Project Director:
Johanna T. Dwyer, D.Sc., R.D.

The purpose of this project is to improve and expand leadership training of nutrition professions in public health and maternal and child health. The major means of accomplishing this is a 23-month internship-master's degree, field experience, and several yearly short courses and continuing education activities. In addition, an active research program for children with special developmental and health needs is in effect.

Adolescent Health Training Program
University of Minnesota
Box 721 UMHC
Harvard Street at East River Road
Minneapolis, MN 55455
(612) 626-2820

Training
MCJ-000985
10/01/79-06/30/92
Project Director:
Robert W. Blum, M.D., M.P.H., Ph.D.

The goal of this program is to improve the status of American youth by developing leadership capabilities among those who will assume responsibility in the adolescent health care field, in both the academic community and in the public sector. The project seeks to recruit and train health care professionals from the fields of medicine, nursing, nutrition, psychology, and social work who wish to have an impact extending beyond individual patient care, and those whose work efforts will benefit the field of adolescent health care through the training of others, the development of service models, applied research, and other creative efforts relating to adolescent health care.

Program in Maternal and Child Health
University of Minnesota
School of Public Health
420 Southeast Delaware Street, Box 197
Mayo Building
Minneapolis, MN 55455
(612) 625-3660

Training
MCJ-000111
07/01/89-06/30/94
Project Director:
Barbara Leonard, R.N., Ph.D.

The Program in Maternal and Child Health at the University of Minnesota School of Public Health provides graduate training to health professionals pursuing a career in public health with a concentration in maternal and child health. It also provides technical assistance, consultation, and support to maternal and child health Title V agencies, other maternal and child health and related agencies within Region V, and the geographic area to the west of Minnesota.

Public Health Nutrition Training Program
University of Minnesota
School of Public Health
420 Southeast Delaware Street, Box 197
Minneapolis, MN 55455
(612) 626-6669

Training
MCJ-009118
07/01/88-06/30/93
Project Director:
Mary T. Story, Ph.D., R.D.

The University of Minnesota School of Public Health offers a 16-month, full-time educational program for qualified persons who wish to specialize in public health nutrition while pursuing the master of public health (M.P.H.) degree. The overall goals of the training program are to improve and enhance the nutritional health of mothers, children, and adolescents; and to develop, expand, and improve delivery of nutrition services to these groups through leadership training of nutritionists who will have positions of responsibility within academic or public health settings. The educational program focuses on the acquisition of relevant knowledge bases, skills, and attitudes to enable or facilitate leadership in the field of maternal and child nutrition.

Pediatrics-Child Psychiatry Collaborative Office Rounds
Washington University
660 South Euclid Avenue, Box 8134
St. Louis, MO 63110
(314) 454-6201

Training
MCJ-009138
10/01/89-09/30/93
Project Director:
Abby L. Wasserman, M.D.

The purpose of this program is to expand practicing pediatricians' expertise in diagnosing, evaluating, understanding, and managing psychological and emotional problems in children and families. The forum will be 2-hour, monthly sessions run jointly by an academic child psychiatrist/pediatrician and an academic pediatrician. The major emphasis will be on the pediatricians presenting difficult cases from their own practices which illustrate a certain psychological problem. In addition, speakers from various organizations will be invited to discuss their organizations and how to make referrals, and patients and their families will be invited to discuss problems associated with chronic illness.

Collaborative Study Group: Psychosocial-Developmental Aspects of Child Health
Dartmouth College
Dartmouth Medical School
Hanover, NH 03756
(603) 646-5475

Training
MCJ-009140
10/01/89-09/30/93
Project Director:
Steven W. Kairys, M.D.; M.P.H.

The role of the primary care pediatrician in the early recognition and effective management of biopsychosocial issues is critical to child health, particularly in our rural location. This project utilizes a case-oriented study group approach which will enable general pediatricians to better recognize and effectively manage psychosocial and developmental problems, as well as encourage ongoing collaboration between psychiatry and pediatrics on a clinical and academic level.

Behavioral Pediatrics Training
Albert Einstein College of Medicine
Jacobi Hospital, Room 1N17
Bronx, NY 10461
(212) 430-5301

Training
MCJ-009096
10/01/86-06/30/91
Project Director:
Ruth E. K. Stein, M.D.

This project has established goals to: (1) Produce future leaders in behavioral pediatrics who are capable of developing excellence in teaching, research, clinical care, and administration and who can successfully negotiate academic appointment and promotion; (2) prepare pediatricians who will integrate the biopsychosocial aspects of pediatrics into the delivery of pediatric health care in both the general and subspecialty practice of pediatrics; and (3) introduce medical students to the fundamentals of behavioral pediatrics.

Conference on Brain/Behavior in Pediatric AIDS
New York State Institute for Basic Research in Developmental Disabilities
1050 Forest Hill Road
Staten Island, NY 10314
(718) 494-5173 or 494-5174

Training
MCJ-009124
10/01/88-03/31/90
Project Director:
Peter Vietze, Ph.D.

This project supported an interdisciplinary conference, "Brain and Behavior in Pediatric AIDS." The conference, held in July 1989, provided training to professionals from various disciplines in the management of pediatric AIDS patients. The conference was also a platform for exchange and discussion of information and experiences of health care professionals and latest developments in this field. The main focus was on the neurological complications of pediatric AIDS and their diagnosis, management, and perspective for eventual therapy. The conference proceedings will be published in 1990.

Maternal and Child Health Training
Columbia University
School of Public Health, MCH Program
Center for Population and Family Health
60 Haven Avenue
New York, NY 10032
(212) 305-6960

Training
MCJ-009042
10/01/89-09/30/94
Project Director:
Rosemary Barber-Madden, Ed.D.

The purpose of this training project is to promote and improve the health status of mothers, infants, children, youth, and their families through MCH training at the master's of public health (M.P.H.) level, service, and research. The program is designed to prepare health professionals to function effectively as maternal and child health policymakers, planners, administrators, researchers, and educators in public health agencies at the State and local levels. The principal groups to be trained are M.P.H. degree candidates drawn from experienced health and allied professional groups, including physicians, nutritionists, nurses, nurse-practitioners, midwives, physician assistants, health administrators, and social workers. Priority is given to professionals from State, local, and community agencies who are committed to return to positions in their agencies; and to trainees recruited from other sources who are committed to serving State, local, and community MCH programs.

Social Work Training in Maternal and Child Health
Columbia University
School of Social Work
622 West 113th Street
New York, NY 10025
(212) 854-5061

Training
MCJ-002027
07/01/84-06/30/92
Project Director:
Alex Gitterman, Ed.D.

The Columbia School of Social Work program prepares social work students in health settings to provide direct and indirect services to children, mothers, and families; provides staff development programs for currently employed professionals; and develops curriculum content and case materials for graduate and continuing education courses.

Pediatrics-Child Psychiatry Continuing Education Collaborative Office Rounds at Duke
Duke University Medical Center
Box 3364
Durham, NC 27710
(919) 684-5513

Training
MCJ-009141
10/01/89-09/30/93
Project Director:
Barbara J. Howard, M.D.

This project addresses the needs of practicing pediatricians for practical, personal, and ongoing training in the psychosocial-developmental aspects of the care of children and families with a bimonthly study group led by a child psychiatrist and a pediatrician. The project goals are to: (1) Enhance practitioners' knowledge, attitudes, and skills in psychosocial-developmental pediatrics; (2) increase their understanding of the expertise of child psychiatrists and other mental health professionals; (3) explore several new models for teaching, including within-practice consultation, video recordings, and the use of new screening tools; and (4) evaluate these efforts as well as the economics of counseling in pediatric practice. Growth of self-sustaining spinoff groups and quality teaching videotapes are additional expected products.

Postgraduate Programs in Maternal and Child Health
University of North Carolina at Chapel Hill
Medical Allied Health Professions
Division of Physical Therapy
Medical School, Wing E
Chapel Hill, NC 27599-7135
(919) 966-4708

Training
MCJ-000149
07/01/65-06/30/92
Project Director:
Joyce W. Sparling, Ph.D.

The primary purpose of this project is to develop leaders to guide the future direction of physical therapy in the area of maternal and child health. A secondary purpose is the provision of MCH educational experiences for related disciplinary personnel. These goals are met by advanced master of science programs, continuing education conferences, a postgraduate fellowship program, medical and other graduate student elective courses, and an advanced clinical site practicum. An additional emphasis of the project continues to be the enhancement of minority presence in each of these programs.

Public Health Nutrition Training: Maternal and Child Health Training Grant
University of North Carolina at Chapel Hill
School of Public Health
Department of Nutrition,
315 Pittsboro Street, CB #7405
Chapel Hill, NC 27599-7405
(919) 966-3432

Training
MCJ-000965
10/01/77-06/30/93
Project Director:
Mildred Kaufman, M.S., R.D.

This project trains graduate level public health nutrition professionals. The program aims to increase the supply of competent public health nutritionists for leadership in State and local health agencies and nonprofit community health centers serving primarily mothers and children. The curriculum includes supervised clinical experience and concurrent and block public health field experience. An extensive continuing education and technical assistance program is undertaken by the faculty, who also engage in related areas of research. The program collaborates with other Title V-funded programs in the university, in North Carolina, and at the national level.

Training in Behavioral Pediatrics
University of North Carolina at Chapel Hill
School of Medicine
Department of Pediatrics, CB #7220
Chapel Hill, NC 27599
(919) 966-2504

Training
MCJ-009089
07/01/86-06/30/91
Project Director:
Frank A. Loda, M.D.

This is a coordinated training program designed to improve the teaching of behavioral pediatrics at the medical student, housestaff, fellowship, and continuing education level. The goals of this program are to: (1) Impart current knowledge and skills in the area of behavioral pediatrics to each trainee level, and (2) develop leaders in the academic communities in behavioral pediatrics.

Training Program in Maternal and Child Health
University of North Carolina at Chapel Hill
School of Public Health
407 Rosenau Hall, CB #7400
Chapel Hill, NC 27599-7400
(919) 966-5981

Training
MCJ-000107
07/01/89-06/30/94
Project Director:
Milton Kotelchuck, Ph.D., M.P.H.

The goal of the Training Program in Maternal and Child Health at the University of North Carolina at Chapel Hill is to improve the health status of mothers and children through: (1) Education of public health professionals for MCH leadership; (2) provision of professional consultation and technical assistance; (3) assessment of needs for training; (4) provision of continuing education; (5) research and dissemination of new knowledge; and (6) advocacy on behalf of maternal and child health. The program serves as a source of support for the region in providing vital technical assistance and consultation, and continuing education.

Behavioral Pediatrics Fellowship Training
Case Western Reserve University
2074 Abington Road
Cleveland, OH 44106
(216) 844-3752

Training
MCJ-009088
09/01/86-06/30/91
Project Director:
Betsy Lozoff, M.D.

The purpose of the training program is to improve behavioral aspects of general and subspecialty pediatric care by preparing behavioral pediatric fellows for careers of academic leadership in clinical care, teaching, and research. Training in clinical care prepares fellows to use themselves as effective tools in the diagnosis and management of behavioral disturbances and to care for patients with special needs in four areas—normal development, psychological aspects of physical disease, developmental disabilities, and psychophysiologic disorders. Training in teaching prepares fellows to contribute to the scientific base of behavioral pediatrics by teaching them to be independent investigators who are ready to sustain investigative careers. Learning by doing, with intensive supervision in case management, teaching, and research is the primary mechanism of training and entails a coordinated interdisciplinary effort of the part of faculty members in pediatrics, psychology, psychiatry, family therapy, and special education.

Collaborative Psychosocial-Development Project
Case Western Reserve University
Department of Pediatrics
2074 Abington Road
Cleveland, OH 44101
(216) 844-3753

Training
MCJ-009142
10/01/89-09/30/93
Project Director:
John H. Kennell, M.D.

The goal of the Collaborative Psychosocial-Developmental Project is to provide community pediatricians with an increased ability to apply psychosocial understanding and techniques to primary care pediatrics. This will facilitate a more comprehensive approach to the management of physical and mental health, provide greater facility for dealing with developmental crises, and provide an enhanced understanding of the psychosocial implications of chronic illness and physical handicaps. This will be achieved by a twice-a-month meeting of 8 to 10 community pediatricians with 2 co-leaders.

Education to Improve Services for Mothers and Children
Case Western Reserve University
2040 Adelbert Road
Cleveland, OH 44106
(216) 368-2440 or 368-3231

Training
MCJ-000140
07/01/67-06/30/93
Project Director:
Janice Neville, D.Sc., M.P.H., R.D.

The purpose of this project is to improve and extend education of persons providing care for mothers and children so that nutrition services of an appropriate kind and quality are provided through public agencies and facilities. The major focus is on education of public health nutritionists with special expertise in maternal and child nutrition care. Education for persons in other health professions is provided in classes and continuing education events.

Interdisciplinary Training Project in Adolescent Health Care
Children's Hospital Medical Center
Division of Adolescent Medicine
Elland and Bethesda Avenues
Cincinnati, OH 45229
(513) 559-4681

Training
MCJ-000964
07/01/87-06/30/92
Project Director:
Joseph L. Rauh, M.D.

This project trains in six disciplines (medicine, nursing, nutrition, psychology, social work, and special education), conducts and presents research, and provides integrated community-based, multiservice health care. It is an interdisciplinary program which includes a basic training curriculum (through seminars and case conferences), a broad clinical base, and a research program (through seminars and project design and implementation). Several innovative program components include the training of national and local leaders, the Adolescent Developmental Disabilities Program, and the Adolescent Center for Education.

Training in Behavioral Pediatrics
Columbus Children's Hospital
700 Children's Drive
Columbus, OH 43205
(614) 461-2175

Training
MCJ-009053
09/01/84-06/30/91
Project Director:
Dan Cowry, M.D.

The overall purpose of this project is to refine, evaluate, and disseminate a model curriculum for the preparation of subspecialists in behavioral and developmental pediatrics who will assume academic and professional leadership positions and function as role models by providing exemplary patient care, demonstrating commitment to research, and exhibiting quality teaching.

Joint Public Health Social Work Training
University of Pittsburgh
Graduate School of Public Health
223 Parran Hall
130 Desoto Street
Pittsburgh, PA 15261
(412) 624-3102

Training
MCJ-000114
07/01/82-06/30/92
Project Director:
Gerald C. St. Denis, Ph.D.

This project supports advanced social work training in public health by means of an interdisciplinary curriculum in public health and social work. Holders of the M.S.W., with past experience in health services to mothers and children, can pursue the M.P.H. only or both the Ph.D. in social work and the M.P.H., by means of an integrated program between the Graduate School of Public Health and the School of Social Work. Graduates are prepared to assume leadership roles in public health social work, in either Title V-related programs or academic environments.

Nurse-Midwives, Leaders in MCH Planning
University of Pennsylvania School of Nursing
420 Guardian Drive
Philadelphia, PA 19104-6096
(215) 898-8281

Training
MCJ-009051
07/01/88-06/30/93
Project Director:
Joyce Thompson, C.N.M., D.Ph.

The primary purpose of this training project is to provide tuition assistance to train selected students in the graduate program of nurse-midwifery. The secondary purpose is to continue to strengthen and expand the curriculum that prepares graduates to become knowledgeable about maternal/child health legislation; policy development; and planning for and implementation of services at the national, State, and local levels. Course content directs the students to explore the relationship between poverty, infant mortality, and the public sector response to identified problems and needs of low-income women. The public policy practicum at the MCH divisions of selected States and municipalities in DHHS Region III gives students first-hand experience in the complexities of the political, legislative, and administrative processes necessary to make services a reality at the program level.

Training in Maternal and Child Health Care
University of Puerto Rico
Department of Human Development
Maternal and Child Health Program
G.P.O. Box 5067
San Juan, PR 00936
(809) 758-2525

Training
MCJ-000161
07/01/89-06/30/94
Project Director:
Ava Navarro, M.D.

The main purpose of the program is to provide Puerto Rico with highly trained health professionals in the field of M.P.H.-MCH to fill positions in the planning, directing, supervising, teaching, research, and policy formulation of the MCH programs in the Commonwealth Department of Health in San Juan City. The M.P.H.-MCH program exists under the auspices of the Department of Human Development and has a two-track program—an 11-month day-time schedule and a 3-year part-time program with evening sessions. Eighteen credits are required in maternal and child health-related courses. A master's of public health in education (M.P.H. Ed.) is also offered.

Child Psychiatry and Joint Education
Rhode Island Hospital
593 Eddy Street
Providence, RI 02903
(401) 277-5617

Training
MCJ-009134
10/01/89-09/30/93
Project Director:
Gregory K. Fritz, M.D.

The project seeks to enhance pediatricians' psychosocial knowledge and skills through a series of evening case discussions and lectures. Young pediatricians newly entering practice meet with child psychiatry and pediatric faculty to focus on a variety of psychosocial issues throughout the academic year.

Maternal and Child Health Training Project
University of South Carolina
College of Social Work
Columbia, SC 29208
(803) 777-7814

Training
MCJ-009097
07/01/87-06/30/92
Project Director:
Patricia G. Conway, M.S.W., Ph.D.

This 5-year training project will: (1) Prepare social workers to assume leadership roles in the health field with a special emphasis on maternal and child health; (2) provide ongoing education for social workers currently working in maternal and child health positions; and (3) disseminate state-of-the-art information regarding social work practice and education in maternal and child health.

Graduate Training in Public Health Nutrition
University of Tennessee at Knoxville
404 Andy Holt Tower
Knoxville, TN 37996-0140
(615) 974-6267

Training
MCJ-000110
07/01/84-06/30/93
Project Director:
Betsy Haughton, Ed.D.

This program educates and trains students and practitioners to meet an increasing demand for qualified personnel in the field of maternal and child nutrition. It also provides continuing education to practitioners in Region IV and long-term master's-level graduate education.

Pediatrics-Child Psychiatry Continuing Education
Vanderbilt University School of Medicine
21st Avenue South
Nashville, TN 37232-2103
(615) 322-6134

Training
MCJ-009135
10/01/89-09/30/93
Project Director:
Gerald B. Hickson, M.D.

This project is a joint pediatric-child psychiatry education program via collaborative office rounds (COR) and involves Vanderbilt faculty, academic fellows, and six practicing pediatricians. The project goal is to address deficiencies in the education of child health providers by developing a case-based education program conducted twice a month. The educational objectives will be to increase understanding of the interplay that occurs between emotions and physical health, increase knowledge of psychiatric disorders and the subtle ways they may present, and increase awareness of the primary physicians' competency with respect to psychosocial-developmental disorders. Each COR will involve presentation of a case and appropriate educational material.

Behavioral Pediatrics Training
Virginia Commonwealth University
Children's Medical Center
MCV Station, Box 514
Richmond, VA 23298
(804) 786-6493

Training
MCJ-009095
10/01/86-06/30/91
Project Director:
Joseph Zanga, M.D.

This program will train individuals to assume positions of leadership in the academic community. These individuals will be well prepared to provide services to families in need, supervise pediatricians and pediatric trainees in the provision of these services, educate professionals in behavioral pediatrics, make new contributions to the field and help to better define it, and contribute to the empirical data base necessary for the scientific advancement of behavioral medicine.

Model Integrating Self-Help in Health Training and Service
George Mason University
4400 University Drive
Fairfax, VA 22030
(703) 323-2918

Training
MCJ-517011
03/01/89-02/28/91
Project Director:
Thomasina S. Borkman, Ph.D.

The purpose of this project is to develop a model to integrate self-help concepts and principles into training for health care professionals and into health care services. The model involves catalyzing a wide range of activities at the national level—training and education, information dissemination, research, and network development—to improve access to self-help groups nationwide. The specific objectives also involve increasing public and professional awareness of the concept, uses, and benefits of self-help groups, as well as advising public agencies on ways to incorporate self-help approaches into their projects. The National Council on Self-Help and Public Health was established in 1988 as a result of the Surgeon General's 1987 Workshop on Self-Help and Public Health. This 13-member council and its executive committee will provide technical support to the project.

Adolescent Health Training Program
University of Washington
Department of Pediatrics
Division of Adolescent Medicine, WJ-10
Seattle, WA 98915
(206) 545-1249

Training
MCJ-000970
07/01/87-06/30/92
Project Director:
James A. Farrow, M.D.

The primary purpose of this training program is to provide multidisciplinary training to medical and psychiatry fellows, residents and students, and nursing, psychology, social work, and nutrition interns and fellows in effectively treating the complex health problems of adolescents. Training is provided in a dozen facilities, including both traditional and nontraditional health care settings, in the greater Seattle area. Major training/service accomplishments are in the area of early intervention for youth at risk for drinking and driving, early intervention to reduce the risk of contracting AIDS among "street" and emancipated youth, specific coping strategies for chronically ill youth, and comprehensive family intervention for pregnant teenagers.

Leadership Training in Pediatric Physical Therapy
University of Washington
Department of Rehabilitation Medicine
Division of Physical Therapy, RJ-30
Seattle, WA 98195
(206) 543-7030

Training
MCJ-009103
10/01/87-06/30/92
Project Director:
Marjorie E. Anderson, Ph.D.

This program is designed to provide highly specialized pediatric physical therapy training on both a long-term basis at the postprofessional level and a short-term continuing education basis within the Pacific Northwest region. Both the long-term academic program and the short-term continuing education program are based on clinical programs which include early identification of infants with actual or potential disabling conditions; early intervention techniques and practices to prevent, ameliorate, or manage such conditions; and longer-term therapeutic and management skills that can be applied to children and adolescents with disabling conditions. The ultimate goal of the project is to prepare an enlarged pool of clinical specialists and academicians to assume leadership positions in the delivery and improvement of community-based health care services for mothers and children.

Maternal and Child Health Development Program
University of Washington
School of Public Health
Seattle, WA 98195
(206) 543-8827

Training
MCJ-009043
10/01/89-06/30/94
Project Director:
Irvin Emanual, M.D.

The purpose of this project is to continue the operation of a formal maternal and child health program in the School of Public Health and Community Medicine. The program offers a master of public health degree with a concentration in maternal and child health. In addition to the standard full-time program, part-time study for graduate students who are currently employed is offered. There is a special program to train personnel with quantitative analytical skills to work in public health MCH agencies. This is the only School of Public Health located in the geographical area north of Berkeley and west of Minneapolis, and the only one in Region X.

Graduate Training in Pediatric Nursing
University of Wisconsin at Madison
School of Nursing
600 Highland Avenue
Madison, WI 53792
(608) 263-5282

Training
MCJ-009052
07/01/84–06/30/93
Project Director:
Karen F. Pridham, R.N., Ph.D.

The purpose of this graduate training project in pediatric nursing is to prepare nurses for leadership. The first goal is to strengthen the curriculum in relation to: (1) Family-centered care of children with chronic conditions and of high- and at-risk infants and young children; and (2) coordination of care in the various settings in which children with chronic conditions or who are at-risk experience care, with the goal of enhancing the family's role in care coordination. In addition, the project aims to strengthen the pediatric nursing program in specialty pediatric nursing and to determine future educational and research directions of pediatric nursing concerning family-centered care of children at risk or with chronic conditions. The second major goal is to strengthen student involvement in Title V agencies and programs and collaboration among faculty and agency/program nursing staff.

Maternal Child Health Training
University of Wisconsin at Madison
School of Nursing
600 Highland Avenue, Room K6/250
Madison, WI 53792
(608) 263-5194 or 263-5292

Training
MCJ-009066
07/01/88–06/30/93
Project Director:
Patricia T. Becker, R.N., Ph.D.

The purpose of this project is to educate nurses for leadership roles in maternal-newborn nursing within the context of the master of science in nursing program, in order to meet State, regional, and national needs in Title V and other secondary/tertiary and rural health care settings. Students are trained in advanced clinical care of their selected population, in approaches to consultation and teaching, in understanding and applying research, in administration and supervision, and in understanding of public policy issues. Program objectives, in addition to the training of students, include recruiting qualified students and faculty; retaining and expanding appropriate clinical training sites; providing educational opportunities in the organization and management of health care delivery programs, health policy formation, teaching, consultation, and administration; conducting periodic formative and summative evaluation of the program and its graduates; and collaborating with leaders in nursing and allied professions in assessment of State and regional health care needs through faculty service activities and regular meetings of the advisory committee.

General Program Concerns

Program Coordination and Networking

Council of Regional Networks for Genetic Services
Arizona Department of Health Services
Division of Disease Prevention
Office of Risk Assessment and Investigation
3008 North Third Street, Suite 101
Phoenix, AZ 85012
(602) 230-5863

Genetics
MCJ-241005
10/01/86-09/30/90
Project Director:
F. John Meaney, Ph.D.

This coalition provides a means for communication between genetic services networks, coalitions of consumer groups, and other professional groups whose activities may relate to the provision of genetics health care. Activities include data collection and analysis, a quality assurance program, genetics education for the public, and policy and advocacy programs for persons with genetic disorders.

Pacific Southwest Regional Genetics Network
California Public Health Foundation
2151 Berkeley Way, Annex 4
Berkeley, CA 94704
(415) 540-3295

Genetics
MCJ-061011
10/01/87-09/30/92
Project Director:
George C. Cunningham, M.D.

This network is directed by genetic services representatives from California, Hawaii, Nevada, and a coordinating council of providers and Title V representatives. The goals of the project are to: (1) Identify genetic services needs for the region; (2) identify and develop resources to meet these needs; (3) establish standards for services to ensure high quality and public protection and confidence in genetic services; and (4) increase professional and public knowledge of genetic conditions and their prevention. Activities include publishing a quarterly newsletter, sponsoring conferences for all health professionals, collecting data and developing a data base, reviewing laboratory quality control procedures, and providing continuing education.

Mountain States Regional Genetic Services Network
Colorado Department of Health
4210 East 11th Avenue
Denver, CO 80220
(303) 331-8373

Genetics
MCJ-081002
10/01/84-09/30/92
Project Director:
Robert S. McCurdy, M.D.

This network is a consortium of States, including Arizona, Colorado, Montana, New Mexico, Utah, and Wyoming, created to provide more comprehensive and better coordinated genetic services to the populations of these States. The goal of the project is to increase the communication, coordination, and collaboration efforts of the Mountain States Region for the delivery and enhancement of genetic services.

Alliance of Genetic Support Groups
38th and R Streets, N.W.
Washington, DC 20057
(202) 331-0942

Genetics
MCJ-111008
10/01/89-09/30/90
Project Director:
Jayne Mackta

The goal of the Alliance of Genetic Support Groups is to promote optimum health care and social and psychological functioning for individuals and families affected by genetic disorders. By strengthening collaboration and communication between consumers and providers of genetic services, the Alliance of Genetic Support Groups seeks to increase awareness about genetic disorders, to improve the availability and accessibility of high quality genetic services, and to enhance education about the needs of individuals and families affected by genetic disorders.

Facilitating Improvement of State Programs for Pregnant Women and Children
National Governors' Association
444 North Capitol Street, Suite 250
Washington, DC 20001
(202) 624-7820

MCHIP
MCJ-117014
10/01/89-09/30/92
Project Director:
Ian Hill

This project will provide assistance to States as they seek to improve primary perinatal and child health care programs by identifying and disseminating information about constructive, practical, and innovative program and policy strategies. Opportunities for collaborative policy initiatives among various State agencies, including Medicaid and MCH, will be identified to facilitate coordinated implementation and operations. The project will actively monitor State efforts to develop and implement innovative Medicaid and MCH initiatives for pregnant women, children, and families.

Legal Assistance Project
Association of Maternal and Child Health Programs
2001 L Street, N.W., Suite 308
Washington, DC 20036
(202) 775-0436

MCHIP
MCJ-113805
10/01/88-09/30/91
Project Director:
Catherine A. Hess, M.S.W.

This project is designed to improve the ability of State Maternal and Child Health Programs to: (1) Effectively implement Title V of the Social Security Act; (2) coordinate with other related Federal programs; and (3) develop creative approaches for utilizing other such programs to meet the needs of mothers, children, adolescents, children with special health care needs, and families.

Maternal and Infant Health Collaboration
American College of Obstetricians and Gynecologists
409 12th Street, S.W.
Washington, DC 20024-2188
(202) 863-2579

MCHIP
MCJ-116018
10/01/88–09/30/91
Project Director:
Janet Chapin, R.N., M.P.H.

This project addresses the need to make current information on obstetric and gynecologic health available to the directors of State Maternal and Child Health Programs in a timely fashion. The following project objectives have been established to reach this goal: (1) Facilitate communications between and among State MCH directors and private sector and academic sector OB/GYNs; (2) encourage the involvement of OB/GYNs in the development of public policy regarding the reduction of infant mortality and the provision of perinatal services to all women; and (3) devise strategies to increase OB/GYN participation in Medicaid and services provided through other public programs.

National Center for Policy Coordination in Maternal and Child Health
Institute for Child Health Policy
5700 Southwest 34th Street, Suite 323
Gainesville, FL 32608
(904) 392-5904

MCHIP
MCJ-125036
10/01/88–09/30/93
Project Director:
Steve A. Freedman, Ph.D.

The mission of the National Center for Policy Coordination in Maternal and Child Health is to extend the capability of the Office of Maternal and Child Health and regional constituent offices to fulfill their mission to develop and implement policy that: (1) Assures mothers, children, adolescents, and families access to quality health care; (2) brings about coordination of efforts, reduces duplication, and enhances integration of service delivery at the Federal, State, and local levels; (3) fosters the collection, analysis, and dissemination of data that assure delivery of needed services in an efficient manner; and (4) facilitates the development of project proposals and program methods that effectively address emerging trends and issues in maternal and child health care.

Development and Maintenance of Communication and Coordination Network for the Delivery and Enhancement of Genetic Services within HHS Region IV
Emory University School of Medicine
Pediatrics/Medical Genetics
2040 Ridgewood Drive
Atlanta, GA 30322
(404) 727-5840

Genetics
MCJ-131002
10/01/83–09/30/90
Project Director:
Louis J. Elsas II, M.D.

This project carries out the functions of the Southeastern Regional Genetics Group (SERGG), serving Alabama, Florida, Georgia, Kentucky, Louisiana, Mississippi, North Carolina, South Carolina, and Tennessee. Activities include identifying regional resources, goals, and needs; developing a registry of regional genetics resources; creating quality control programs; providing information to parents and professionals; reviewing third-party reimbursements; and providing a forum for the discussion of ethical and legal issues in genetics.

Great Lakes Regional Genetics Group
Indiana State Board of Health
Genetic Diseases Section
Maternal and Child Health
1330 West Michigan Street
Indianapolis, IN 46206-1964
(317) 633-0644

Genetics
MCJ-181003
10/01/88–09/30/91
Project Directors:
Diane Downing, M.S.N.
Lorraine Matheson-Rubin

The purpose of the Great Lakes Regional Genetics Group is to continue an established genetics network for Federal MCH Region V, which includes Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin. The network provides a forum for sharing resources and developing cooperative efforts toward improving the quality and quantity of services related to genetic diseases. Project goals include improving communication and coordination within Region V, promoting the coordination of educational activities, sharing educational and technical resources, establishing and implementing laboratory quality assurance programs, developing a uniform database system, and improving financial support for genetic services.

Great Plains Genetics Service Network
University of Iowa
Department of Pediatrics
Division of Medical Genetics
Iowa City, IA 52242
(319) 356-2674

Genetics
MCJ-191002
10/01/83–09/30/90
Project Director:
James W. Hanson, M.D.

This project seeks to address the current lack of coordination of information and resources, which results in duplication of services, inefficient use of resources, and decreased impact on the delivery of genetic services. The Great Plains Genetics Services Network serves to coordinate resources; review reimbursement systems; develop a teratology information service; develop systems of data collection and analysis; develop and implement a quality control program; and provide genetics education to teachers, health professionals, and the public.

New England Regional Genetics Group
Massachusetts Health Research Institute, Inc.
101 Tremont Street, Suite 600
Boston, MA 02108
(617) 426-6378

Genetics
MCJ-251003
10/01/85–09/30/90
Project Directors:
Allen C. Crocker, M.D.
Richard W. Erbe, M.D.
Stacey T. Kacoyanis, M.S.

The purposes of this network are to provide a forum for the discussion of regionwide concerns regarding the provision of optimal services in medical genetics, to promote the availability of high quality genetic services, to ensure that providers and consumers have the opportunity to discuss issues of mutual interest, and to encourage active genetics education throughout New England. Activities have included the establishment of an external laboratory quality control program for maternal serum alpha-fetoprotein testing, the development of a partnership among several centers to produce improved risk tables for Down syndrome, collection of data on the utilization of amniocentesis in New England, and establishment of a regional fragile-X syndrome parents' organization.

Coordination and Communication Network for Genetics Services in New York State
New York State Department of Health and Health Research, Inc.
Wadsworth Center for Laboratories and Research
Laboratory of Human Genetics
P.O. Box 509
Albany, NY 12201
(518) 474-6796

Genetics
MCJ-361004
10/01/84–09/30/92
Project Director:
Ann M. Willey, Ph.D.

The purpose of this project is to ensure that all individuals affected with or at risk for transmitting a genetic disorder are able to make informed health decisions and are provided access to diagnostic, counseling, and preventive services. Achievements to date include the expansion of the Genetics Network of the Empire State (GENES); development of a data base of genetic services contacts; newborn screening followup reorganization, including tracking of infants diagnosed with galactosemia, PKU, and hypothyroidism; provision of technical assistance to other regions; and coordination of new State appropriations for expanded services to sickle cell patients.

Pacific Northwest Regional Genetics Group
Oregon Health Sciences University
Crippled Children's Division
P.O. Box 574
Portland, OR 97207
(503) 494-8342

Genetics
MCJ-411002
10/01/84–09/30/92
Project Director:
Jonathan Zonana, M.D.

This Pacific Northwest Regional Genetics Group (PacNoRGG) seeks to develop a coordinated system to assure high quality genetic services and educational programs in Alaska, Idaho, Oregon, and Washington. The project goals are to: (1) Provide a communications network among the various genetics groups in the Northwest; (2) make genetic services more easily accessible to all residents in the four States; (3) provide educational programs to professionals and the public; and (4) assure the quality of genetic services within the four States.

Increasing Numbers of Southeast Asians Reviewing Comprehensive Health Services (INSEARCH)
Rhode Island Department of Health
Division of Family Health
75 Davis Street
Providence, RI 02908
(401) 277-2312

Genetics
MCJ-441002
10/01/88–09/30/91
Project Director:
Peter R. Simon, M.D., M.P.H.

The goal of this project is to enhance the availability, accessibility, and utilization of genetic and other maternal and child health care services for the Southeast Asian (SEA) populations residing in Rhode Island. The main objective in reaching this goal is the development, implementation, and evaluation of a comprehensive followup and case management tracking unit at the health centers serving the majority of the SEA populations. This unit will assist members of the primary and secondary care teams in meeting the specific health care needs of this population, will train SEA interpreters concerning maternal and child health care concepts, and will educate health care providers concerning specific cultural differences.

Delta Project: A Model Program Designed to Promote Regional Otologic Health Care
University of Tennessee at Memphis
College of Medicine
Department of Otolaryngology
956 Court Avenue, Room B226
Memphis, TN 38163
(901) 528-6511

MCHIP
MCJ-473808
10/01/86–09/30/90
Project Directors:
Gerald S. Golden, M.D.
Kevin T. Kavanagh, M.D.

This goal of this project is to develop a model referral network and regionalized health care delivery system for children at high risk for hearing, speech, and language disorders resulting from otologic diseases. Project objectives are to: (1) Develop staff in the tri-State area of Arkansas, Mississippi, and Tennessee and create and maintain a tri-State referral network; (2) identify contributing factors which inhibit health care delivery to infants and children with otologic problems who live among rural, remote, economically disadvantaged, and culturally diverse population groups; (3) remove barriers to care for infants and children with otologic health care problems; and (4) identify infants and children with hearing disorders living among rural and remote, economically disadvantaged, and culturally diverse population groups.

Texas Genetics Network
Texas Department of Health
1100 West 49th Street
Austin, TX 78756-3199
(512) 458-7321

Genetics
MCJ-481005
10/01/88–09/30/92
Project Director:
Patti Patterson, M.D.

The goal of this project is to decrease the impact of genetic disease in Texas, and to alleviate the suffering and anxiety of patients and their families due to the threat or presence of genetic disease. The objectives of the project are to: (1) Establish a well coordinated statewide network of high quality human genetic services for all residents of Texas; (2) develop educational programs for health care professionals, consumers of genetic services, and the lay public regarding genetic diseases and available genetic services; (3) coordinate the laboratory diagnostic capacity of existing genetics groups in the areas of biochemistry, cytogenetics, DNA diagnosis, and prenatal diagnosis to assure high quality services; (4) collect data on the provision of genetic services; and (5) increase consumer involvement in the network.

Expanding Resources and Improving Genetics Services Using the Mid-Atlantic Regional Human Services Network: A Seven State Consortium
University of Virginia Medical School
Department of Pediatrics
Division of Medical Genetics
P.O. Box 386
Charlottesville, VA 22902
(804) 924-2665

Genetics
MCJ-511003
10/01/88–09/30/90
Project Director:
Thaddeus E. Kelly, M.D., Ph.D.

The goal of the Mid-Atlantic Regional Human Genetics Network is to increase the access to and the quality of genetic services. This will be achieved through cooperative interchange among the seven member States. The program involves education of the public and of providers of genetic services; quality control of genetics laboratories; data collection and analyses of genetic services; and special projects.

Development of a Statewide Genetic Services Project
Wyoming Department of Health and Social Services
Division of Health and Medical Services
Hathaway Building, Fourth Floor
Cheyenne, WY 82002-0710
(307) 777-7166

Genetics
MCJ-561001
10/01/87–09/30/91
Project Director:
Larry Goodmay, M.S., M.B.A.

This project provides comprehensive genetic services (clinical, educational, and laboratory) to the residents of Wyoming, as well as educational and informational services to health care providers, teachers, and the general public. Wyoming contracts for clinical genetics personnel services from adjacent regional medical centers; these physicians will travel on a scheduled basis to several clinic sites located throughout the State to provide genetic services.

General Program Concerns

Financing

Improving Health Insurance Coverage for Adolescents
University of California at San Francisco
Institute for Health Policy Studies
1326 Third Avenue, Box 0936
San Francisco, CA 94143
(415) 476-3896

MCHIP
MCJ-063500
10/01/87–09/30/90
Project Directors:
Paul W. Newacheck, Dr.P.H.
Margaret McManus, M.H.S.
Harriette B. Fox

The goal of this project is to improve access to appropriate health care services for adolescents, especially for those adolescents with special health care needs, by removing or alleviating existing financial barriers to health care services. Activities include assessing the adequacy of group, individual, and commercial health insurance policies for adolescents; identifying alternative mechanisms for removing or alleviating existing financial barriers; and preparing state-of-the-art reports on these issues.

Training for Reimbursement for Genetic Services
University of Connecticut Health Center
Department of Pediatrics
263 Farmington Avenue
Farmington, CT 06032
(203) 674-1465

Training
MCJ-009107
10/01/87–09/30/90
Project Director:
Robert Greenstein, M.D.

This project updates and improves the knowledge and skills of health and related professionals in programs serving mothers and children. It specifically addresses a need to increase knowledge and awareness of genetic services by developing a set of standardized definitions of these services that may be uniformly implemented by health care genetics providers, consumers, and third-party payers in order to improve the effectiveness of reimbursement, which could stabilize the availability and affordability of services. Training materials about genetic services will be developed with input from both national and regional advisory groups, and will include information about professional services, procedures, and laboratory tests, as well as consumer needs and resources.

Families in the Changing Health Care Marketplace
Center for Public Representation
520 University Avenue
Madison, WI 53703
(608) 251-4008

MCHIP
MCJ-555002
07/01/87–06/30/90
Project Director:
Nina L. Camic, J.D., M.A.

The goal of this project is to assist in the formation of a collaborative effort involving the government, providers, private payers, and families in order to reconcile the operational difficulties of achieving health care cost containment while retaining quality, access, and family-centeredness. The project will seek to develop approaches to health care financing that are sensitive to the needs of families with children with special health care needs, to assist families with special health care needs in dealing with financial problems which pose barriers to obtaining appropriate health services, and to disseminate information regarding financing of care for children with special health care needs.

General Program Concerns

Data/Information

Evaluation of the Implementation of the Medi-Cal Comprehensive Perinatal Services
University of California at San Francisco
Institute for Health Policy Studies
1326 Third Avenue
San Francisco, CA 94143
(415) 476-5254

Research
MCJ-067010
04/01/89-03/31/92
Project Director:
Carol C. Korenbrot, Ph.D.

The goals of this project are twofold: (1) To determine whether birthweight outcomes for patients of the institutionalized Comprehensive Perinatal Services (CPS) program are significantly better than those for Medi-Cal patients receiving prenatal care in general, and (2) to determine how CPS services differ from those of both the OB Access pilot project and the prenatal services reimbursed by Medi-Cal. By studying both services and outcomes, if the birthweight outcomes are indeed better, the characteristics of prenatal care program service delivery can be more easily and effectively replicated by others. If there are no differences in birthweight outcomes, then the differences between CPS and the OB Access service delivery at the provider and patient levels will be characterized so that, rather than dismantle the program, changes in service organization, content, delivery, and utilization can be made to improve birthweight outcomes.

Health and Nutrition of U.S. Hispanic Children
Stanford University School of Medicine
Department of Pediatrics
Stanford, CA 94305
(415) 327-4800, ext. 538

Research
MCJ-060518
04/01/85-03/31/91
Project Director:
Fernando S. Mendoza, M.D.

This study analyzes data from the National Health and Nutrition Examination Surveys I and II and the Hispanic Health and Nutrition Examination Survey to identify and quantify the major health and nutritional problems of Hispanic children and adolescents in the United States. Specifically, the project plans to assess the level of severity of health and nutritional problems for these population groups; identify factors related to poor health and nutrition; assess the functional implications of identified health problems; and determine how these problems are being addressed by health care programs.

Delaware Automated Tracking and Information System
Delaware Department of Health and Social Services
Division of Public Health
P.O. Box 637
Dover, DE 19903
(302) 736-4767

MCHIP
MCJ-103303
10/01/88-09/30/90
Project Directors:
T. Zimmerman, Ph.D.
D. Clendaniel

The primary goal of this project is to begin to provide the State of Delaware with a fully operational, statewide method of tracking clients known to the various maternal and child health/handicapped children programs. Specific objectives are to survey program staff to determine data elements needed by each program and to contract with a technical assistant to facilitate surveys of programs, determine hardware needs, develop the necessary software, and train staff in its use.

Assessment of MCH/CC Activities
Public Health Foundation
1220 L Street, N.W., Suite 350
Washington, DC 20005
(202) 898-5600

MCHIP
MCJ-117002
10/01/88–06/30/91
Project Director:
James T. Dimas, M.P.A.

This project seeks to provide an analysis of the Public Health Foundation's ASTHO (Association of State and Territorial Health Officials) Reporting System FY 1987–88 data related to services and expenditures of the Nation's State MCH and CSHN Programs, and to prepare reports about these data. In addition, the foundation publishes information on the Nation's public health agencies and responds to special data requests from the U.S. Public Health Service, Congress, State and local health agencies, and other public health organizations.

Developing Policies to Promote Healthy Families: A Focus on Promotion of Adolescent Health
American Association of Marriage and Family Therapists
Family Impact Seminar/Research and Education Foundation
1717 K Street, N.W.
Washington, DC 20006
(202) 429-1825

MCHIP
MCJ-113002
10/01/88–09/30/92
Project Director:
Theodora Ooms

The goal of this project is to improve family involvement in adolescent health through providing the best information available about the family's role, exemplary program models, and supportive policies to staff at the Federal and State levels. The program will include three separate but related activities conducted over 3 years: (1) Federal policy seminars, (2) background state-of-the-art reports, and (3) replication of seminars in selected States. An estimated 500 Federal and 1,000 State policy staff will benefit directly from the project's activities.

Healthy Mothers, Healthy Babies
American College of Obstetricians and Gynecologists
409 12th Street, S.W., Suite 309
Washington, DC 20024-2188
(202) 863-2458

MCHIP
MCJ-116019
02/01/89–01/31/92
Project Directors:
Janet Chapin, R.N., M.P.H.
Lori Cooper

The national Healthy Mothers, Healthy Babies Coalition seeks to: (1) Promote public awareness of preventive health habits for all pregnant women and their families; (2) develop networks for sharing information among groups concerned about improving the health of mothers and babies; (3) distribute public education materials on topics related to improving maternal and child health; and (4) assist the development of State Healthy Mothers, Healthy Babies Coalitions. The national coalition has 95 members, representing voluntary and professional organizations and Federal agencies. Through meetings, conference exhibits, press conferences, surveys and reports, publications, and a quarterly newsletter, the coalition reaches thousands of individuals each year with information and strategies for improving maternal and child health.

National Center for Education in Maternal and Child Health
Georgetown University
38th and R Streets, N.W.
Washington, DC 20057
(202) 625-8400

MCHIP
MCJ-111006
10/01/89–09/30/90
Project Director:
Robert C. Baumiller, S.J., Ph.D.

The goal of this project is to contribute to the maintenance and improvement of the health status of mothers and children by providing comprehensive and current MCH-related information services and technical assistance to all agencies, organizations, and individuals with maternal and child health interests, with particular emphasis on those involved in or related to Title V programs. The project maintains an MCH reference collection, a SPRANS data base, and information on over 1,000 MCH-related organizations. Publications include the *MCH Program Interchange* and a variety of directories, resource guides, and conference proceedings.

Primary Care Assistance and Accountability Project
Association of Maternal and Child Health Programs
2001 L Street, N.W., Suite 308
Washington, DC 20036
(202) 775-0436

MCHIP
MCJ-113400
10/01/87–09/30/90
Project Director:
Catherine A. Hess, M.S.W.

This project's goals are to improve the capacity of State MCH agencies to: (1) Make high quality, comprehensive primary care available and accessible to all children and youth; (2) measure and document the needs of children and youth; (3) assess the adequacy of the primary care system in meeting these needs; and (4) measure and document the use of Title V MCH funds. Project activities include assessing current State efforts in areas related to primary care, needs assessment and planning, and the use of data systems and reporting; conducting surveys; identifying resources for technical assistance, potentially useful data systems, and reporting formats; and developing and delivering resources and technical assistance to State MCH agencies.

Pacific Basin Maternal and Child Health Resource Center
University of Guam
P.O. Box 5143
UOG Station
Mangilao, GU 96923
(671) 734-4717

MCHIP
MCJ-663490
09/01/87–08/31/90
Project Director:
Augusta Rengiil, R.N., M.P.H.

The goal of this project is to provide assistance to the maternal and child health programs in the Pacific Basin in their efforts toward improving the health status of women and children. The project maintains an MCH resource center, makes culturally relevant materials available to health service providers, and develops publications which address special concerns of Pacific Basin populations or which present information in various island languages.

IDEALS (Idaho Data Exchange and Linkage System)
Idaho Bureau of Maternal and Child Health
450 West State Street
Boise, ID 83720
(208) 334-5962

MCHIP
MCJ-163303
10/01/88–09/30/90
Project Director:
Thomas L. Bruck, D.D.S., M.P.H.

The goal of this project is to improve the health status of women, children, and families by improving the Bureau of Maternal and Child Health planning and management capabilities to serve these populations. State staff of the Bureau of Maternal and Child Health, with the assistance of the Bureau of Systems Management, will develop, design, and implement an information system linking all maternal and child health and developmental disabilities programs.

Midwest Maternal and Child Health Data Improvement Project
University of Illinois at Chicago
School of Public Health
2035 West Taylor Street
Chicago, IL 60612
(312) 996-5951 or 996-0719

MCHIP
MCJ-173590
10/1/88–09/30/91
Project Directors:
Naomi M. Morris, M.D., M.P.H.
Joan Kennelly, R.N., M.P.H.

The Midwest MCH Data Improvement Project seeks to improve the health outcomes of the MCH populations in Regions V and VII by designing, testing, and implementing a biregional MCH data system to enhance the States' capacities to formulate policy and programmatic strategies. The project will work to correct the current fragmentation of health system data by creating the infrastructure necessary to develop and maintain uniform minimum data sets and program/health outcome indicators for MCH populations and programs; define and test a system for transferring data from the States to the central data base; and field-test selected indicators using a sample from the multistate MCH data base.

Assuring Comprehensive Health Care Using the Iowa Profile of Problems and Goals
University of Iowa
Iowa Child Health Specialty Clinics
247 University Hospital School
Iowa City, IA 52242
(319) 356-1118

MCHIP
MCJ-195022
10/01/87–09/30/90
Project Director:
Richard P. Nelson, M.D.

The Iowa Profile of Problems and Goals (IPPG), a clinical descriptive tool used to characterize the functional status of the child or family according to required special services or assistance, will be used in this project to obtain detailed analyses of selected populations of children receiving Child Health Specialty Clinics services. The project will determine the usefulness of IPPG as an objective method of describing the populations of children receiving the services of State Title V programs, and the applicability of IPPG as a case management method in tracking.

AAUAP/MCH Consortium and AAUAP Database System
American Association of University Affiliated
Programs for Persons with Developmental Disabilities
8630 Fenton Street, Suite 410
Silver Spring, MD 20910
(301) 588-8252

Training
MCJ-009129
07/01/89-06/30/92
Project Director:
William E. Jones, Ph.D.

This goal of the AAUAP MCH Consortium is to promote and strengthen working relationships between UAPs and State Title V programs. Additional project goals and objectives related to the AAUAP Database System will be achieved with the direct involvement and approval of the AAUAP Board of Directors, the AAUAP Database Committee, the AAUAP Policy Analysis and Evaluation Committee, and other related committees and individuals designated by the AAUAP Board of Directors.

HHS Region III Perinatal Information Consortium
Johns Hopkins University
School of Hygiene and Public Health
Department of Maternal and Child Health
624 North Broadway
Baltimore, MD 21205
(301) 955-3754

Training
MCJ-009110
10/01/87-09/30/90
Project Directors:
Greg R. Alexander, M.P.H., Sc.D.
Donna Petersen, M.H.S., Sc.D.

This project seeks to improve the health and survival of infants and their mothers by supporting the technical perinatal information management and utilization capacities of State MCH/CSHCN Programs for planning, coordinating, targeting, advocating, promoting, and evaluating health services. This will be accomplished by assisting State agencies in the identification of data acquisition and utilization needs and in the development of strategies to address these concerns, and by providing technical assistance and educational support to State agencies to enhance their capacities to collect, analyze, and disseminate data.

Planning Proposal for a National Survey of Children with Special Health Needs
Albert Einstein College of Medicine
1300 Morris Park Avenue
Bronx, NY 10461
(212) 430-5301

MCHIP
MCJ-117007
10/01/88-03/31/91
Project Director:
Ruth E.K. Stein, M.D.

The purpose of this project is to establish and implement a planning mechanism for a new population-based survey of children in the United States who have special health needs. It will involve designing, planning, and piloting a national cross-sectional survey that will provide the data base and framework for the development and monitoring of a system of regionalized and community-based service. This will allow for the addition of longitudinal and/or sequential cross-sectional surveys in the future.

Expanding and Institutionalizing the Region IV Network for Data Management and Utilization
University of North Carolina at Chapel Hill
Health Services Research Center
Chase Hall 132-A, CB #7490
Chapel Hill, NC 27599
(919) 966-7117

MCHIP
MCJ-373915
10/01/86-09/30/90
Project Director:
Priscilla A. Guild, M.S.P.H.

This project seeks to identify factors contributing to high infant mortality in Region IV (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee) and to provide technical assistance to the State MCH Programs which address these factors. Activities include the publication of the Perinatal Data Book, which summarizes 46 health status indicators and 17 health service indicators (by race) for each State, the region, and the Nation; an annual workshop (carrying continuing education credit) for MCH program and State statistical staff; and at least two annual technical assistance site visits to address State-specific problems.

Health and Education Collaboration for Children with Handicaps
University of North Carolina at Chapel Hill
Department of Maternal and Child Health
Rosenau Hall, CB #7400
Chapel Hill, NC 27599-7400
(919) 966-5983

MCHIP
MCJ-375031
10/01/88-09/30/91
Project Director:
Anita M. Farel, Dr.P.H.

The purpose of this project is to promote interagency collaboration and coordination among State Programs for Children with Special Health Care Needs, Part H lead agencies, and State education agencies in DHHS Region IV by improving the collection and use of data that will support program planning, monitoring, and evaluation. Specifically, the objectives of this project are to: (1) Develop an Infants and Toddlers Model Data Set to improve the ability of State programs for children with special health care needs to identify children in need of services; (2) design a protocol for sharing data among State programs for children with special health care needs in order to monitor the health and developmental status of the target population; and (3) promote interprogram communication regarding data collection and use among State programs and improved reporting and information management systems.

Maternal and Child Health Studies
Information Sciences Research Institute
8027 Leesburg Pike, Suite 102
Vienna, VA 22180
(703) 22180

MCHIP
MCJ-510536
07/01/86-06/30/90
Project Director:
Margaret W. Pratt, J.D.

This project collects and publishes MCH data which can be used for program planning and evaluation. As its primary activity, the project has used both historical and current data to provide uniform and consistent annual information, as well as trend data, for the United States, each State and county, selected major cities, and other defined areas.

General Program Concerns

Overcoming Ethnocultural Barriers to Genetic Services

Community-Based Genetics Services Network for Native Americans of the Southwest
University of Arizona College of Medicine
Arizona Health Sciences Center
Section of Genetics/Dysmorphology
Department of Pediatrics
Tuscon, AZ 85724
(602) 795-5675

Genetics
MCJ-041003
10/01/87–09/30/90
Project Director:
H. Eugene Hoyme, M.D.

This project seeks to increase the utilization of genetic services by Native Americans throughout the Southwest by providing clinics and professional and community education. Project goals include developing a definition of the incidence of congenital anomalies and genetic disorders and investigating their societal impact in the target population; reducing the number of genetic disorders and congenital anomalies in the target population; and creating a heightened awareness by Native Americans and their health care providers of the role of genetics in health care and disease.

SFGH Perinatal Genetics
University of California at San Francisco
Department of OB/GYN and Reproductive Sciences
Third and Parnassus Street, Room U262
San Francisco, CA 94143
(415) 821-3133

Genetics
MCJ-061005
10/01/87–09/30/90
Project Directors:
Mitchell S. Golbus, M.D.
William R. Crombleholme, M.D.

The goals of this project are to (1) lower the barriers to accessing appropriate genetic counseling and testing interventions faced by the San Francisco General Hospital (SFGH) perinatal system patients, and (2) develop a model system for the delivery of genetic counseling interventions to underserved populations and disseminate the knowledge gained through the program's efforts. To achieve these goals, the program will employ genetic counselors and bilingual, bicultural counseling aides, maintain appropriate protocols for services and referrals, integrate the genetics program into the existing SFGH Perinatal System, and maintain a satellite prenatal diagnosis center at SFGH which will offer amniocentesis and maternal serum alpha-fetoprotein followup.

Southeast Asian Developmental Disabilities Project
San Diego-Imperial Counties Developmental Services, Inc.
4355 Ruffin Road, Suite 205
San Diego, CA 92123
(619) 576-2965

Genetics
MCJ-061010
10/01/89–09/30/92
Project Director:
James O. Cleveland, Ed.D.

This project will develop a model program to reduce the ethnocultural barriers and enhance the availability and utilization of genetic and other maternal and child health services for the Southeast Asian refugee populations in San Diego County. The project will have an impact on this target population with respect to increasing the understanding, acceptance, and utilization of Western health care services. The project will enhance the understanding and sensitivity level of primary and secondary health care providers to the cultural practices, attitudes, and health care needs of this target population.

Demonstration of an Innovative Approach to Genetic Counseling Services for the Deaf Population
Gallaudet Research Institute
Gallaudet University
800 Florida Avenue, N.E.
Washington, DC 20002
(202) 651-5258

Genetics
MCJ-111005
10/01/84–09/30/90
Project Director:
Kathleen Shaver Arnos, Ph.D.

The purpose of this project is to overcome the barriers to genetic counseling services that are currently encountered by the deaf population. To achieve this goal, the project will: (1) Provide a comprehensive model genetics program for hearing-impaired individuals and their families at Gallaudet University; (2) integrate and coordinate the provision of genetic services to deaf clients with those provided by the District of Columbia, Commission of Public Health, Genetics Services Program; and (3) initiate extensive information dissemination and outreach education to geneticists, deafness professionals, medical professionals, and deaf consumer groups.

Southeast Asian Birthing and Infancy Project
Massachusetts Health Research Institute
101 Tremont Street
Boston, MA 02108
(617) 426-6378

Genetics
MCJ-251008
10/01/89–09/30/92
Project Directors:
Jennifer Cochran, M.P.H.
Jonathan Spack

The primary goal of the Southeast Asian Birthing and Infancy (SABAI) Project is to reduce barriers and increase access to prenatal genetic and other maternal/infant health services and information for Southeast Asian refugees in Lowell, Massachusetts. Project objectives include providing specific services to Southeast Asian women to facilitate access to care; conducting health education activities in native Southeast Asian languages; developing a strategic plan to reduce institutional barriers; facilitating appropriate referrals to genetic services; providing followup for pregnant Southeast Asian women identified with a thalassemia or other hemoglobinopathy; and improving the rate of adequate prenatal care utilization at Lowell General Hospital Prenatal Clinic.

Vision Screening of Deaf Students for Genetic and Support Services to Those Identified as Deaf-Blind
Minneapolis Children's Medical Center
2525 Chicago Avenue South
Minneapolis, MN 55404
(612) 863-5822

Genetics
MCJ-271002
10/01/89–09/30/92
Project Director:
Sandra L.H. Davenport, M.D.

The goals of this project are to: (1) Establish a pilot project to identify potential deaf-blindness among deaf students in three types of school settings; (2) identify Type I Usher syndrome prior to vision screening from questionnaire evidence of congenital vestibular dysfunction; (3) provide genetic diagnosis and counseling to identified deaf-blind students; (4) educate families and others about the causes and functional consequences of deaf-blindness; (5) improve psychological and psychosocial support services to deaf-blind individuals and their families; and (6) participate in an interagency effort to develop effective case coordination services for deaf-blind people.

Integrated Genetic Services for Montana Native Americans
Shodair Hospital
Department of Medical Genetics
P.O. Box 5539
Helena, MT 59604
(406) 444-7530

Genetics
MCJ-301002
10/01/89–09/30/92
Project Director:
Susan O. Lewin, M.D.

The goals of this project are to: (1) Make available local, community-based clinical genetic services to the Montana Native Americans; (2) make genetic service delivery culturally acceptable; (3) educate a broad spectrum of health care providers, community members, and students about genetics, genetic disorders, and birth defects; (4) raise the awareness of tribal leaders about the significance of genetic disease and birth defects; and (5) lessen stigmatization of Native Americans in their communities due to genetic disease and birth defects.

Proposal to Extend and Enhance the Utilization of Existing Genetic Services by Overcoming Ethnocultural Barriers
University of Medicine and Dentistry of New Jersey
Medical School
Division of Human Genetics
185 South Orange Avenue
Newark, NJ 07103
(201) 456-4477

Genetics
MCJ-341004
10/01/88–09/30/91
Project Director:
Franklin Desposito, M.D.

The purpose of this project is to improve the medical care of immigrant populations in Atlantic City, Camden, and Trenton, New Jersey, who face numerous barriers posed by their ethnocultural, language/communications, and financial backgrounds. A detailed system of strategies involving educational materials which are linguistically and culturally sensitive, audiovisual aids, bilingual genetic screening forms, translator selection, training, and utilization, and intercultural workshops has been developed to assist the local genetic services programs in overcoming these barriers to access.

Oklahoma Native American Genetic Services Program
Oklahoma State Department of Health
Division of Maternal and Child Health
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Genetics
MCJ-401002
10/01/87–09/30/90
Project Director:
Edd D. Rhoades, M.D., M.P.H.

This project seeks to develop a coordinated network of genetic services that is culturally acceptable and financially accessible to Native Americans in Oklahoma in order to increase their utilization of genetic services. Program objectives include establishing genetic clinical services at seven selected Indian Health Services hospitals and clinics; increasing identification and referral of Oklahoma Native Americans at risk for genetic disorders or birth defects; collecting and analyzing epidemiological data on the incidence and prevalence of birth defects and genetic disorders; and developing collaborative liaisons among the genetics team, Indian Health Services, and related programs.

Comprehensive Genetic Services and Education Program for the Deaf and Hearing Impaired
St. Christopher's Hospital for Children
Section of Medical Genetics
Fifth and Lehigh Avenue
Philadelphia, PA 19133
(215) 427-4430 (voice) or 427-4433 (TDD)

Genetics
MCJ-421007
10/01/88-09/30/91
Project Director:
Kathleen E. Toomey, M.D.

This project has established goals to: (1) Provide genetic diagnostic, evaluation, and counseling services on a regular and continuing basis; (2) provide genetic counseling and educational sessions in American Sign Language (ASL) when needed; (3) establish the Center for Genetic and Acquired Deafness as a resource for professionals and lay persons regarding causes of deafness and educational interventions; (4) assess the impact of a diagnosis of deafness in a young child on the family; (5) involve a genetic counseling student and a deaf or hearing-impaired college or graduate student in the center's projects during summer break and have them work together to develop an educational tool.

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